Case 18-12860 Doc 1 Filed 05/01/18 Entered 05/01/18 19:10:36 Desc Main Document Page 1 of 74

| Fill in this information to identify your case: | |
|---|-------------------------------|
| United States Bankruptcy Court for the: | |
| Northern District of: Illinois (State) | |
| Case number (if known) | Chapter you are filing under: |
| | Chapter 7 Chapter 11 |
| | Chapter 12 Chapter 13 |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | art 1: Identify Yourself | | |
|----|---|-------------------------------|---|
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name | Sherral First name | First name |
| | Write the name that is on your government-issued picture identification (for example, your driver's license or passport | A Middle name Banks Last name | Middle name Last name |
| | Bring your picture identification to your meeting with the trustee. | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III) |
| 2. | All other names you have used in the last | First name | First name |
| | 8 years Include your married or maiden names. | Middle name | Middle name |
| | | Last name | Last name |
| | | First name | First name |
| | | Middle name | Middle name |
| | | Last name | Last name |
| 3. | Only the last 4 digits of your Social | XXX - XX | |
| | Security number or federal Individual Taxpayer Identification number (ITIN) | or 9 xx - xx- | OR 9 xx - xx- |

Case 18-12860 Doc 1 Filed 05/01/18 Entered 05/01/18 19:10:36 Desc Main Document Page 2 of 74

| De | First Name | A Banks Middle Name Last Name | Case number (if known) |
|----|--|--|--|
| | That wante | Wildle Name Last Name | |
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 4. | Any business names and Employer | I have not used any business names or EINs. | I have not used any business names or EINs. |
| | Identification Numbers (EIN) you have used in the last | Business name | Business name |
| | 8 years | Business name | Business name |
| | Include trade names and doing business as names | EIN | EIN |
| | | EIN | EIN |
| 5. | Where you live | | If Debtor 2 lives at a different address: |
| | | 611 Independence Dr Number Street | Number Street |
| | | Aurora Illinois 60506 | |
| | | City State Zip Code Kane | City State Zip Code |
| | | County | County |
| | | • | |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to |
| | | notices to you at this mailing address. | this mailing address. |
| | | , | , and the second |
| | | Number Street | Number Street |
| | | | |
| | | City State Zip Code | City State Zip Code |
| 6. | Why you are choosing this district | Check one: | Check one: |
| | to file for bankruptcy | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. |
| | | I have another reason. Explain. (See 28 U.S.C. §§ 1408.) | I have another reason. Explain. (See 28 U.S.C. §§ 1408.) |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

Case 18-12860 Doc 1 Filed 05/01/18 Entered 05/01/18 19:10:36 Desc Main Document Page 3 of 74

| D | ebtor 1 Sherral | A | | Case number (if kno | wn) |
|----|---|--|---|--|--|
| | First Name | Middle Name | Last Name | | |
| Pa | Tell the Court Abo | out Your Bankruptcy Case | e | | |
| 7. | The chapter of the Bankruptcy Code you are choosing to file under | | scription of each, see <i>Notice Requ</i> . Also, go to the top of page 1 and | | |
| 8. | How you will pay the fee | more details about ho cashier's check, or more may pay with a credit I need to pay the fee Individuals to Pay You I request that my fee judge may, but is not the official poverty lin | ow you may pay. Typically, if you oney order. If your attorney is so card or check with a pre-printer in installments. If you choose our Filing Fee in Installments (Or experience to waive your fee, and the that applies to your family sizen, you must fill out the Application. | ou are paying the submitting your p ed address. this option, sig fficial Form 103, this option only d may do so only ze and you are u | the clerk's office in your local court for e fee yourself, you may pay with cash, payment on your behalf, your attorney on and attach the <i>Application for</i> A). If you are filing for Chapter 7. By law, a y if your income is less than 150% of anable to pay the fee in installments). If the Chapter 7 Filing Fee Waived (Official) |
| 9. | Have you filed for bankruptcy within the last 8 years? | ✓ No. Yes. District District District | When When When | MM / DD / YYYY MM / DD / YYYY MM / DD / YYYY | Case number Case number Case number |
| 10 | Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | V No. Yes. Debtor District Debtor District | <u>W</u> hen <u>W</u> hen | MM / DD / YYYY | Relationship to you Case number, if known Relationship to you Case number, if known |
| 11 | Do you rent your residence? | ✓ No. Go to line Yes. Fill out // | I obtained an eviction judgment ag ne 12. Initial Statement About an Eviction of kruptcy petition. | | ot You (Form 101A) and file it with |

Case 18-12860 Doc 1 Filed 05/01/18 Entered 05/01/18 19:10:36 Desc Main Document Page 4 of 74

Debtor 1 Sherral Banks Case number (if known) First Name Last Name Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole No. Go to Part 4. proprietor of any fullor part-time Yes. Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set Chapter 11 of the appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance Bankruptcy Code and sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). are vou a small business debtor? I am not filing under Chapter 11. For a definition of small business debtor, No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the see 11 U.S.C. § Bankruptcy Code. 101(51D). Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have ✓ No. any property that Yes. What is the hazard? poses or is alleged to pose a threat of imminent and If immediate attention is needed, why is it needed? identifiable hazard to public health or safety? Or do you Where is the property? own any property Street Number that needs immediate attention? For example, do you own perishable goods, City State Zip Code or livestock that must be fed, or a building that needs urgent repairs?

Case 18-12860 Doc 1 Filed 05/01/18 Entered 05/01/18 19:10:36 Desc Main Document Page 5 of 74

Debtor 1 Sherral A Banks Case number (if known)

First Name Last Name Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have ✓ I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I counseling agency within the 180 days before I about credit filed this bankruptcy petition, and I received a filed this bankruptcy petition, and I received a counseling. certificate of completion. certificate of completion. Attach a copy of the certificate and the payment plan, Attach a copy of the certificate and the payment plan, The law requires that if any, that you developed with the agency. if any, that you developed with the agency. you receive a briefing about credit I received a briefing from an approved credit I received a briefing from an approved credit counseling before you counseling agency within the 180 days before I counseling agency within the 180 days before I file for bankruptcy. filed this bankruptcy petition, but I do not have a filed this bankruptcy petition, but I do not have a certificate of completion. certificate of completion. You must truthfully check one of the Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, following choices. If you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment you cannot do so, you plan, if any. plan, if any. are not eligible to file. I certify that I asked for credit counseling services ☐ I certify that I asked for credit counseling services from an approved agency, but was unable to from an approved agency, but was unable to If you file anyway, the obtain those services during the 7 days after I obtain those services during the 7 days after I court can dismiss your made my request, and exigent circumstances made my request, and exigent circumstances case, you will lose merit a 30-day temporary waiver of the merit a 30-day temporary waiver of the whatever filing fee you requirement. requirement. paid, and your creditors can begin To ask for a 30-day temporary waiver of the To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what requirement, attach a separate sheet explaining what collection activities efforts you made to obtain the briefing, why you were efforts you made to obtain the briefing, why you were again. unable to obtain it before you filed for bankruptcy, and unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this what exigent circumstances required you to file this Your case may be dismissed if the court is dissatisfied Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before with your reasons for not receiving a briefing before you filed for bankruptcy. you filed for bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: I have a mental illness or a mental I have a mental illness or a mental Incapacity. Incapacity. deficiency that makes me deficiency that makes me incapable of realizing or making incapable of realizing or making rational decisions about finances. rational decisions about finances. Disability. Disability. My physical disability causes me to My physical disability causes me to be unable to participate in a be unable to participate in a briefing in person, by phone, or briefing in person, by phone, or through the internet, even after I through the internet, even after I reasonably tried to do so. reasonably tried to do so. Active duty. I am currently on active military Active duty. I am currently on active military duty in a military combat zone. duty in a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing about credit counseling, you must file a motion for about credit counseling, you must file a motion for waiver of credit counseling with the court. waiver of credit counseling with the court.

Case 18-12860 Doc 1 Filed 05/01/18 Entered 05/01/18 19:10:36 Desc Main Document Page 6 of 74

| Debtor 1 Sherral First Name | | anks Case | number (if known) | |
|---|--|---|---|--|
| | estions for Reporting Purposes | stiname | | |
| 16. What kind of debts do you have? | 16a. Are your debts primarily of "incurred by an individual property No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily by | orimarily for a personal, fan ousiness debts? Business vestment or through the op | nily, or household purpose." debts are debts that you incur peration of the business or inv | rred to obtain |
| 17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | expenses are paid that fur | | iny exempt property is excluded ute to unsecured creditors? | and administrative |
| 18. How many creditors do you estimate that you owe? | ✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999 | 1,000-5,000 5,001-10,000 10,001-25,000 | ☐ 25,001-50☐ 50,001-10☐ More than | 00,000 |
| 19. How much do you estimate your assets to be worth? | \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | \$1,000,001-\$10 r \$10,000,001-\$50 \$50,000,001-\$10 \$100,000,001-\$5 | 0 million | 0,001-\$1 billion 00,001-\$10 billion 000,001-\$50 billion n \$50 billion |
| 20. How much do you estimate your liabilities to be? | \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | \$1,000,001-\$10 r \$10,000,001-\$50 \$50,000,001-\$10 \$100,000,001-\$5 | 0 million | 0,001-\$1 billion 00,001-\$10 billion 000,001-\$50 billion n \$50 billion |
| For you | I have examined this petition, and correct. If I have chosen to file under Chapter 11, United States Code. I under Chapter 7. If no attorney represents me and out this document, I have obtained I request relief in accordance with I understand making a false state connection with a bankruptcy caboth. 18 U.S.C. §§ 152, 1341, 18 /s/ Sherral Banks Signature of Debtor 1 | apter 7, I am aware that I ma understand the relief availa I did not pay or agree to pa ed and read the notice requ h the chapter of title 11, Ur ement, concealing property se can result in fines up to | ay proceed, if eligible, under Cable under each chapter, and I ay someone who is not an attouired by 11 U.S.C. § 342(b). nited States Code, specified in y, or obtaining money or proper \$250,000, or imprisonment for Signature of Debtor 2 | Chapter 7, 11,12, or 13 choose to proceed orney to help me fill a this petition. |
| | Executed on 5/1/2018 MM / DD / | YYYY | Executed on | / YYYY |

Case 18-12860 Doc 1 Filed 05/01/18 Entered 05/01/18 19:10:36 Desc Main Document Page 7 of 74

| Debtor 1 Sherral | Α | Banks | Case number (if k | nown) |
|--|---------------------------|-----------------------|------------------------------|--|
| First Name | Middle Name | Last Name | | |
| For your attorney, if you are represented by one | eligibility to proceed un | der Chapter 7, 11, 1 | 2, or 13 of title 11, United | ave informed the debtor(s) about I States Code, and have explained the so certify that I have delivered to the |
| If you are not | debtor(s) the notice requ | uired by 11 U.S.C. § | 342(b) and, in a case in w | hich § 707(b)(4)(D) applies, certify that I |
| represented by an | have no knowledge afte | r an inquiry that the | information in the schedu | les filed with the petition is incorrect. |
| attorney, you do not | 4.5 | | | |
| need to file this page. | /s/ James Nowak | | Date | 5/1/2018 |
| | Signature of Attorney | for Debtor | MM | M / DD / YYYY |
| | | | | |
| | | | | |
| | James Nowak | | | |
| | Printed name | | | |
| | Semrad Law Firm | | | |
| | Firm name | | | |
| | 1444 N. Farnsworth | Avenue | | |
| | Street | | | |
| | Suite 300 | | | |
| | | | | |
| | Aurora | | Illinois | 60505 |
| | City | | State | Zip Code |
| | | | | |
| | Contact phone | 3122568701 | Email address | jnowak@semradlaw.com |
| | | | | |
| | 6324423 | | Illinois | |
| | Bar number | | State | |

Case 18-12860 Doc 1 Filed 05/01/18 Entered 05/01/18 19:10:36 Desc Main Document Page 8 of 74

| Fill in this infor | mation to identify your c | ase: | |
|---------------------------|---------------------------|-------------|----------------------|
| Debtor 1 | Sherral | Α | Banks |
| | First Name | Middle Name | Last Name |
| Debtor 2 | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois |
| | | | (State) |
| Case number (If known) | | | |

| П | Check if this is an |
|---|---------------------|
| _ | amended filing |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information 12/

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

| 1. Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$0.00 \$7,731.81 \$7,731.81 Your liabilities |
|--|--|
| 1b. Copy line 62, Total personal property, from Schedule A/B | \$7,731.81 Your liabilities |
| 1c. Copy line 63, Total of all property on Schedule A/B | Your liabilities |
| Summarize Your Liabilities | Your liabilities |
| | |
| Schadula D: Craditore Who Have Claims Secured by Property (Official Form 106D) | |
| Schadula D: Craditore Who Have Claims Secured by Property (Official Form 106D) | Amount you owe |
| . Scredule D. Creditors with trave Claims Secured by Property (Official Form 1905) | Ф |
| 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$5,000.00 |
| . Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) | \$0.00 |
| 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | фоо одо оо |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$26,870.00 |
| Your total liabilities | \$31,870.00 |

Case 18-12860 Doc 1 Filed 05/01/18 Entered 05/01/18 19:10:36 Desc Main Document Page 9 of 74

| Deb | tor 1 | Sherral | A | Banks | Case number (if known) | | | |
|-------------|--|---|--|--|--|------------|--|--|
| . | | First Name | Middle Name | Last Name | -d- | | | |
| Part | 4: | Answer These Question | is for Administra | tive and Statistical Record | as | | | |
| 6. A | re yo | ou filing for bankruptcy und | er Chapters 7, 11, o | or 13? | | | | |
| Г | No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. | | | | | | | |
| | 기 ⋎ | es. | | | | | | |
| | | | | | | | | |
| 7. W | /hat | kind of debt do you have? | | | | | | |
| Ŀ | | | | umer debts are those incurred by Fill out lines 8-10 for statistical p | y an individual primarily for a personal, | | | |
| _ | | | . , | • | | | | |
| L | | our debts are not primarily nis form to the court with you | | ou have nothing to report on the | is part of the form. Check this box and su | bmit | | |
| | | | | | | | | |
| | | the Statement of Your Cur 122A-1 Line 11; OR, Form 1 | | ne: Copy your total current mon orm 122C-1 Line 14. | thly income from Official | \$2,582.67 | | |
| 9. | Con | ov the following special cate | egories of claims fro | om Part 4, line 6 of Schedule | E/F: | | | |
| | - | | | | | | | |
| | From Part 4 on Schedule E/F, copy the following: | | | Total claim | | | | |
| | 9a. | Domestic support obligations | (Copy line 6a.) | | \$0.00 | | | |
| | | | axes and certain other debts you owe the government. (| | \$0.00 | | | |
| | 96. | Taxes and certain other debts | | | <u>*****</u> | | | |
| | 9c. | Claims for death or personal in | njury while you were | intoxicated. (Copy line 6c.) | \$0.00 | | | |
| | 9d. | Student loans. (Copy line 6f.) | | | \$18,134.00 | | | |
| | 90 | 9e. Obligations arising out of a separation agreement or divo | | or divorce that you did not repor | \$0.00 | | | |
| | | rity claims. (Copy line 6g.) | paration agrounding | o. a o. oo anac you and not ropor | | | | |
| | Ωf Γ | Pohte to popeion or profit cha | uring plane, and other | r similar debts. (Copy line 6h.) | \$0.00 | | | |
| | ອາ. L | Depres to beneath of broth-stra | ung plans, and other | i siiiiiai debis. (Copy iiile 611.) | | | | |

\$18,134.00

9g. **Total.** Add lines 9a through 9f.

Case 18-12860 Doc 1 Filed 05/01/18 Entered 05/01/18 19:10:36 Desc Main Document Page 10 of 74

| Fill in this | information to identify your c | ase: | | | |
|--|--|---|--|---|--|
| Debtor 1 | Sherral | А | Banks | | |
| 20010. | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse, if fil | ling) First Name | Middle Name | Last Name | | |
| | - I not realito | | | | |
| United Sta | ates Bankruptcy Court for the: | Northern | District of Illinois (State) | | |
| Case num | ber | | | | |
| , , | | | | | Check if this is an |
| Officia | ll Form 106A/B | | | | amended filing |
| Sched | dule A/B: Prope | rty | | | 12/ |
| category v responsibl write your | where you think it fits best. I e for supplying correct infor name and case number (if k | Be as complete and ac mation. If more space nown). Answer every c | asset only once. If an asset fits in mor curate as possible. If two married peo is needed, attach a separate sheet to juestion. Other Real Estate You Own or H | ple are filing together, both a this form. On the top of any a | re equally |
| | | | residence, building, land, or similar p | | |
| | No. Go to Part 2 | | , , , | | |
| | Yes. Where is the property? | | | | |
| _ | | <u>Wh</u> a | t is the property? Check all that apply. | | claims or exemptions. Put |
| 1.1 | Street address, if available, or | other description | Single-family home | | red claims on Schedule D: nims Secured by Property. |
| | on oot address, if available, of | · 🔲 | Duplex or multi-unit building | Current value of the | Current value of the |
| | | <u> </u> | Condominium or cooperative | entire property? | portion you own? |
| | | <u> </u> | Manufactured or mobile home Land | | |
| | Number Street | | nvestment property | Describe the nature of | |
| | | H | Timeshare | interest (such as fee s the entireties, or a life | |
| | City State | Zip Code | Other | | |
| | | Who one. | has an interest in the property? Chec | | mmunity property |
| | | | Debtor 1 only | | |
| | | | Debtor 2 only | | |
| | | <u> </u> | Debtor 1 and Debtor 2 only | | |
| | | | At least one of the debtors and another | | |
| | | | er information you wish to add about t perty identification number: | his item, such as local | |
| If you | own or have more than one, li | | isorty radiining and maintain. | | |
| - | | Wha | t is the property? Check all that apply. | | claims or exemptions. Put |
| 1.2 | Street address, if available, or | other description | Single-family home | | red claims on Schedule D: nims Secured by Property. |
| | , | · 🔲 | Duplex or multi-unit building | Current value of the | Current value of the |
| | | | Condominium or cooperative Manufactured or mobile home | entire property? | portion you own? |
| | | <u> </u> | Land | | |
| | Number Street | <u> </u> | nvestment property | Describe the nature of | |
| | O'the Object | | Timeshare | interest (such as fee s the entireties, or a life | |
| | City State | Zip Code | Other | | |
| | | Who one. | has an interest in the property? Chec | | mmunity property |
| | | | Debtor 1 only | | |
| | | П | Debtor 2 only | | |
| | | | Debtor 1 and Debtor 2 only | | |
| | | | At least one of the debtors and another | | |
| | | | er information you wish to add about t perty identification number: | his item, such as local | |

Case 18-12860 Doc 1 Filed 05/01/18 Entered 05/01/18 19:10:36 Desc Main Document Page 11 of 74

| Debtor 1 | Sherral | Α | Banks Case number | er <i>(if known</i>) | |
|----------------------|--|---------------------------------------|--|---|---|
| | First Name | Middle Name | Last Name | | _ |
| 1.3Stre | et address, if available, or o | | What is the property? Check all that apply. Single-family home Duplex or multi-unit building | the amount of any secu | claims or exemptions. Put red claims on <i>Schedule D:</i> ims Secured by Property. Current value of the |
| | | | Condominium or cooperative Manufactured or mobile home Land | entire property? | portion you own? |
| Nun City | nber Street State | Zip Code | Investment property Timeshare | Describe the nature o interest (such as fee s the entireties, or a life | imple, tenancy by |
| 2. Add you haPart 2: | the dollar value of the pove attached for Part 1. W | ortion you own for rite that number h | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this item property identification number: all of your entries from Part 1, including any entriesere. t in any vehicles, whether they are registered or nalso report it on Schedule G: Executory Contracts and | (see instructions) , such as local es for pages ot? Include any vehicles | mmunity property |
| 3. Cars, va | | tility vehicles, motor | rcycles | | |
| 3.1 | Model: Year: | Nissan Altima 2013 | Who has an interest in the property? Check one. Debtor 1 only | the amount of any secu | claims or exemptions. Put ured claims on <i>Schedule D:</i> aims Secured by Property. |
| | Approximate mileage: Other information: 2013 Nissan Altima | 110000 | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another | Current value of the entire property? \$6000.00 | Current value of the portion you own? \$6000.00 |
| | | | Check if this is community property (see instructions) | | |
| 3.2 | Make Model: Year: | Saturn Vue 2003 215000 | Who has an interest in the property? Check one. Debtor 1 only | the amount of any secu | claims or exemptions. Put ured claims on Schedule D: aims Secured by Property. |
| | Approximate mileage: Other information: 2003 Saturn Vue | 213000 | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another | Current value of the entire property? \$450.00 | Current value of the portion you own? \$450.00 |
| | | | Check if this is community property (see | | |

Case 18-12860 Doc 1 Filed 05/01/18 Entered 05/01/18 19:10:36 Desc Main Document Page 12 of 74

| Debtor 1 | Sherral First Name | A Middle Name | Banks Last Name | Case numbe | r (if known) | |
|----------|--|------------------|--|---------------------------------------|------------------------|---|
| 3.3 | Make Model: Year: Approximate mileage: Other information: | | Who has an interest in thone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 At least one of the debtor 2 Check if this is comminstructions) | only tors and another | the amount of any secu | claims or exemptions. Put tred claims on Schedule D: nims Secured by Property. Current value of the portion you own? |
| 3.4 | Make Model: Year: Approximate mileage: Other information: | | Who has an interest in thone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 | | the amount of any secu | claims or exemptions. Put ared claims on Schedule D: nims Secured by Property. Current value of the portion you own? |
| | ercraft, aircraft, motor hor nples: Boats, trailers, motors No | • | At least one of the debi | tors and another nunity property (see | | |
| 4.1 | Yes Make Model: Year: Approximate mileage: Other information: | | Who has an interest in thone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 At least one of the debtor 1 check if this is comminstructions) | only tors and another | the amount of any secu | claims or exemptions. Put ared claims on Schedule D: hims Secured by Property. Current value of the portion you own? |
| 4.2 | Make Model: Year: Approximate mileage: Other information: | | Who has an interest in thone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 At least one of the debtor 1 check if this is comminstructions) | only tors and another | the amount of any secu | claims or exemptions. Put ared claims on Schedule D: nims Secured by Property. Current value of the portion you own? |
| | the dollar value of the porve attached for Part 2. Wr | - | - | | | 450.00 |

Case 18-12860 Doc 1 Filed 05/01/18 Entered 05/01/18 19:10:36 Desc Main Document Page 13 of 74

Debtor 1 Sherral Banks Case number (if known) First Name Last Name Part 3: **Describe Your Personal and Household Items** Current value of the Do you own or have any legal or equitable interest in any of the following items? portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware Yes. Describe... Used Household Furniture \$300.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music Yes. Describe... Used Electronics \$800.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles No Yes. Describe... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No Yes. Describe... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment No Yes. Describe... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Yes. Describe... **Used Clothing** \$150.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe... 13. Non-farm animals Examples: Dogs, cats, birds, horses Nο Yes. Describe... 14. Any other personal and household items you did not already list, including any health aids you did not list **V** No Yes. Describe... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$1250.00 for Part 3. Write that number here

Case 18-12860 Doc 1 Filed 05/01/18 Entered 05/01/18 19:10:36 Desc Main Document Page 14 of 74

Debtor 1 Sherral Banks Case number (if known) First Name Last Name **Describe Your Financial Assets** Part 4: Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition **✓** No Yes Cash: 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. Institution name: \$0.00 17.1. Checking account: Chase Bank 17.2. Checking account: 17.3. Savings account: 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: Bank of America PrePaid card \$31.81 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ◪ No Institution or issuer name: 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture **✓** No Name of entity % of ownership: Yes. Give specific information about them

Case 18-12860 Doc 1 Filed 05/01/18 Entered 05/01/18 19:10:36 Desc Main Document Page 15 of 74

| Debt | tor 1 Sherral | A | Banks | Case number (if known) | |
|------|--|---|-----------------------------|--|---------------|
| | First Name | Middle Name | Last Name | | |
| 20. | Government and corporate Negotiable instruments Non-negotiable instruments | | | | |
| | Yes. Give specific information about them | Issuer name: | | | |
| | | | | | |
| | | | | | · - |
| | | | | | |
| 21. | Retirement or pension | | thrift eavings accounts | s, or other pension or profit-sharing plans | |
| | No No | 1A, LITIOA, REOGII, 401(K), 400(D) | , tillit savings accounts | s, or other pension or pront-straining plans | |
| | Yes. List each | Type of account: | Institution name: | | |
| | account | 401(k) or similar plan: | | | |
| | separately. | | | | |
| | | Pension plan: | - | | |
| | | IRA: | | | . ——— |
| | | Retirement account: | | | . |
| | | Keogh: | | | <u></u> |
| | | Additional account: | | | |
| | | Additional account: | | | |
| 22. | | prepayments I deposits you have made so that with landlords, prepaid rent, public | | | |
| | Yes | Electric: | | | |
| | | Gas: | | | · |
| | | Heating oil: | | | |
| | | Security deposit on rental unit: | | | |
| | | Prepaid rent: | | | |
| | | Telephone: | | | |
| | | Water: | | | |
| | | Rented furniture: | | | |
| | | Other: | | | |
| 23. | Annuities (A contract fo | or a periodic payment of money to | you, either for life or for | r a number of years) | |
| | ✓ No Yes | Issuer name and description: | | | |
| | | | | | |
| | | | | | |
| | | | | | |

Case 18-12860 Doc 1 Filed 05/01/18 Entered 05/01/18 19:10:36 Desc Main Document Page 16 of 74

| Debte | or 1 Sherral | A | Banks | Case number (if known) | |
|-------|---|---|---|--|---|
| 24. | First Name Interests in an ed | Middle Nam | | ınder a qualified state tuition program. | |
| | | b)(1), 529A(b), and 529(b)(| 1). | | |
| | ✓ No Inst | titution name and descriptio | n. Separately file the records of any int | erests.11 U.S.C. § 521(c): | |
| | | | | | |
| | | | | | |
| 25. | Trusts, equitable exercisable for yo | | perty (other than anything listed in | line 1), and rights or powers | |
| | ✓ No | | | | |
| | Yes. Describe. | | | | |
| 26. | | | crets, and other intellectual proper | | |
| | - N | domain names, websites, p | proceeds from royalties and licensing a | greements | |
| | Yes. Describe. | | | | |
| | | | | | |
| 27. | | ses, and other general into g permits, exclusive licenses | t angibles , cooperative association holdings, liqu | uor licenses, professional licenses | |
| | ✓ No | | | | |
| | Yes. Describe. | | | | |
| | | | | | |
| Mon | ov or proporty | wood to you? | | | Current value of the |
| Mon | ey or property o | owed to you? | | | Current value of the portion you own? Do not deduct secured claims or exemptions |
| | ey or property o | | | | portion you own? |
| | Tax refunds owed ✓ No | to you | | Federal: | portion you own? Do not deduct secured claims or exemptions. |
| | Tax refunds owed ✓ No | to you ific information em, including whether | | Federal: State: | portion you own? Do not deduct secured claims or exemptions. |
| | Tax refunds owed No Yes. Give spec about the you already | to you | | State: | portion you own? Do not deduct secured claims or exemptions. \$0.00 |
| 28. | Tax refunds owed No Yes. Give spec about the you alread and the ta | ific information em, including whether dy filed the returns ax years | usal support, child support, maintenar | | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds owed No Yes. Give spec about the you alread and the ta | ific information em, including whether dy filed the returns ax years | usal support, child support, maintenar | State: Local: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds owed No Yes. Give spec about the you alread and the ta Family support Examples: Past due | ific information em, including whether dy filed the returns ax years | usal support, child support, maintenar | State: Local: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 |
| 28. | Tax refunds owed No Yes. Give spec about the you alread and the ta Family support Examples: Past due | to you ific information em, including whether dy filed the returns ax years | usal support, child support, maintenar | State: Local: nce, divorce settlement, property settlement Alimony: Maintenance: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 |
| 28. | Tax refunds owed No Yes. Give spec about the you alread and the ta Family support Examples: Past due | to you ific information em, including whether dy filed the returns ax years | usal support, child support, maintenar | State: Local: Alimony: Maintenance: Support: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds owed No Yes. Give spec about the you alread and the ta Family support Examples: Past due | to you ific information em, including whether dy filed the returns ax years | usal support, child support, maintenar | State: Local: Alimony: Maintenance: Support: Divorce settlement: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds owed ✓ No Yes. Give spec about the you alrear and the ta Family support Examples: Past due ✓ No Yes. Give spec | to you ific information em, including whether dy filed the returns ax years | usal support, child support, maintenar | State: Local: Alimony: Maintenance: Support: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00 |
| 29. | Tax refunds owed ✓ No Yes. Give spectors about the you alread and the taxon the taxon that the second se | to you ific information em, including whether dy filed the returns ax years e or lump sum alimony, spo ific information | | State: Local: Alimony: Maintenance: Support: Divorce settlement: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds owed ✓ No Yes. Give spec about the you alread and the tax Family support Examples: Past due ✓ No Yes. Give spec Other amounts so Examples: Unpaid value of Social Section (Social Section) | ific information mm, including whether dy filed the returns ax years e or lump sum alimony, spo ific information | payments, disability benefits, sick pay, | State: Local: Alimony: Maintenance: Support: Divorce settlement: Property settlement: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 29. | Tax refunds owed ✓ No Yes. Give spec about the you alrear and the tax Family support Examples: Past due ✓ No Yes. Give spec Other amounts so Examples: Unpaid value of the social Section of t | ific information mm, including whether dy filed the returns ax years e or lump sum alimony, spo ific information | payments, disability benefits, sick pay, | State: Local: Alimony: Maintenance: Support: Divorce settlement: Property settlement: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |

Case 18-12860 Doc 1 Filed 05/01/18 Entered 05/01/18 19:10:36 Desc Main Document Page 17 of 74

| Deb | tor 1 Sherral | Α | Banks | Case number (if known) | |
|------|---|-------------------------------|------------------------------------|--|---|
| | First Name | Middle Name | Last Name | | |
| 31. | Interests in insurance Examples: Health, disabi | | ı savings account (HSA); credit, h | omeowner's, or renter's insurance | |
| | Yes. Name the insur of each policy and li | rance company | Company name: | Beneficiary: | Surrender or refund value: |
| 32 | Any interest in propert | ty that is due you from so | meone who has died | | |
| 02. | | of a living trust, expect pro | | , or are currently entitled to receive | |
| | No Yes. Describe | | | | |
| 33. | | | u have filed a lawsuit or made | a demand for payment | |
| | Examples: Accidents, em | nployment disputes, insura | nce claims, or rights to sue | | |
| | Yes. Describe | | | | |
| 34. | Other contingent and to set off claims | unliquidated claims of e | very nature, including counterc | laims of the debtor and rights | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| 35. | Any financial assets yo | ou did not already list | | | |
| | Yes. Describe | | | | |
| | | | | | |
| 36. | | - | Part 4, including any entries fo | . • . | \$31.81 |
| | | | | | |
| Part | 5: Describe Any Bu | usiness-Related Prop | erty You Own or Have an Ir | nterest In. List any real estate in Part | 1. |
| 37. | Do you own or have an | ny legal or equitable inte | rest in any business-related pro | pperty? | |
| | No. Go to Part 6. | | | | urrent value of the ortion you own? |
| | Yes. Go to line 38. | | | Do | o not deduct secured claims exemptions |
| 38. | Accounts receivable o | r commissions you alrea | dy earned | | |
| | ✓ No Yes. Describe | | | | |
| 39. | Office equipment, furn Examples: Business-rela | | nodems, printers, copiers, fax ma | chines, rugs, telephones, desks, chairs, electro | onic devices |
| | No Yes. Describe | | | | |
| | | | | | |

Case 18-12860 Doc 1 Filed 05/01/18 Entered 05/01/18 19:10:36 Desc Main Document Page 18 of 74

| Deb | tor 1 Sherral | Α | Banks | Case number (if known) | |
|----------|--------------------------------|---|---------------------------------------|-----------------------------------|---------------------------------------|
| | First Name | Middle Name | Last Name | _ | |
| 40. | Machinery, fixtures, e | equipment, supplies you i | use in business, and tools of yo | our trade | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| | | | | | |
| | - | | | | |
| 41. | Inventory | | | | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| | Ш | | | | |
| | - | | | | |
| 42. | Interests in partnersh | hips or joint ventures | | | |
| | ✓ No | | | | |
| | Yes. Give specific | | Name of entity: | % of ownership: | |
| | information about | | | | |
| | them | | | | |
| | | | | | _ |
| | | | | | |
| 43. | Customer lists, mailing | g lists, or other compilati | ons | | |
| | — | , | | | |
| | ✓ No | | | | |
| | Yes. Do your lists | include personally identifiab | ele information (as defined in 11 | J.S.C. § 101(41A))? | |
| | ☐ No | | | | |
| | <u> </u> | cribe | | | |
| | 100. 2000 | 5115 6 | | | |
| 44. | Any business-related | property you did not alre | eady list | · | |
| | No. | | | | |
| | No | | | | |
| | Yes. Give specific information | | | | |
| | iiioiiiiatioii | | | | |
| | | | | | <u> </u> |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| 45. A | dd the dollar value of | all of your entries from Pa | art 5, including any entries for | pages you have attached | |
| | | | | | |
| <u> </u> | Deceribe Any F | ' | l Fishing Polated Brownsh | . Va. Our and lave on Interest in | |
| Part | If you own or have a | rarm- and Commercia n interest in farmland, list it ir | li Fishing-Related Property Part 1 | You Own or Have an Interest In. | |
| | | | | | |
| 46. | Do you own or have a | any legal or equitable inte | erest in any farm- or commerc | ial fishing-related property? | |
| | No. Go to Part 7. | | | | Current value of the portion you own? |
| | Yes. Go to line 47 | | | | Do not deduct secured claims |
| | | | | | or exemptions |
| 47. | Farm animals | | | | |
| | Examples: Livestock, p | ooultry, farm-raised fish | | | |
| | √ No | | | | |
| | Yes. Describe | | | | |
| | | | | | |
| | | | | | |

Case 18-12860 Doc 1 Filed 05/01/18 Entered 05/01/18 19:10:36 Desc Main Document Page 19 of 74

| Debt | or 1 Sherral First Name | | Banks Last Name | Case number (if known) | |
|-----------------|--------------------------------|---|------------------------|------------------------------|-------------|
| 48. | Crops-either growing | | | | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| | | | | | |
| 49. | Farm and fishing equi | pment, implements, machinery, fixtur | es, and tools of trade | | |
| | ✓ No Yes. Describe | | | | |
| | Tes. Beschibe | | | | |
| 50. | Farm and fishing supp | lies, chemicals, and feed | | | |
| | V No | | | | |
| | Yes. Describe | | | | |
| | | | | | |
| 51. | Any farm- and comme | rcial fishing-related property you did | not already list | | |
| | ✓ No Yes. Describe | | | | |
| | Tes. Describe | | | | |
| | | | | ſ | |
| | | II of your entries from Part 6, includin | | | |
| • | | | | L | |
| | | | | | |
| Part 7 | | perty You Own or Have an Inter | | lot List Above | |
| 53. | | perty of any kind you did not already is, country club membership | list? | | |
| | ✓ No | | | | |
| | Yes. Give specific information | | | | |
| | | | | | |
| | | | | | |
| 54. A | dd the dollar value of a | II of your entries from Part 7. Write th | at number here | | > |
| | | | | | |
| | | | | | |
| | | | | | |
| Part 8 | List the Totals of | f Each Part of this Form | | | |
| 55. F | Part 1: Total real estate | e, line 2 | | > | |
| 56. r | oart 2 total vehicles, lin | ne 5 | 40.450.00 | | |
| | | nd household items, line 15 | \$6450.00 | | |
| | art 4: Total financial as | | \$1250.00 | | |
| 59. F | Part 5: Total business-r | elated property, line 45 | \$31.81 | • | |
| 60. F | Part 6: Total farm- and | fishing-related property, line 52 | | | |
| 61. F | Part 7: Total other prop | erty not listed, line 54 | | | |
| 62. T | Total personal property | Add lines 56 through 61. | \$7731.81 | | + \$7731.81 |
| | | | | Copy personal property total | ,, |
| 00 - | | Debadula A/D Add Pro ES - P - 00 | | | \$7731.81 |
| 63. T | οται οτ all property on § | Schedule A/B. Add line 55 + line 62 | | | |

Case 18-12860 Doc 1 Filed 05/01/18 Entered 05/01/18 19:10:36 Desc Main Document Dage 20 of 7/

| | | | n as Exempt | 04/16 |
|---------------------------------|-----------------------------------|-------------|------------------------------|------------------------------------|
| Official I | Form 106C | | | Check if this is ar amended filing |
| Case number (If known) | | | | |
| | ankruptcy Court for the: <u>N</u> | lorthern | District of Illinois (State) | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 (Spouse, if filing) | E M | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 1 | Sherral | Α | Banks | |

information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Par | t 1: Identify the Property You Clair | n as Exempt | | |
|-----|---|--|---|--|
| 1. | Which set of exemptions are you claimi You are claiming state and federal | • | , , | |
| | You are claiming federal exemption | . , . | | |
| 2. | For any property you list on Schedule A | . , , | , | |
| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own Copy the value from Schedule A/B | Amount of the exemption you claim Check only one box for each exemption. | Specific laws that allow exemption |
| | Brief description: Nissan Altima, 2013, 2013 Nissan Altima Line from Schedule A/B: 03 | \$6,000.00 | \$1,000.00; \$0.00 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(c); 735 ILCS 5/12-1001(b) |
| | Brief description: Used Household Furniture Line from Schedule A/B: 06 | \$300.00 | \$300.00 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) |
| 3. | ✓ No | ery 3 years after that for | 375? cases filed on or after the date of adjustment.) vithin 1,215 days before you filed this case? | |

Case 18-12860 Doc 1 Filed 05/01/18 Entered 05/01/18 19:10:36 Desc Main Document Page 21 of 74

Debtor 1 Sherral Banks Case number (if known) First Name Middle Name Last Name **Additional Page** Part 2: Brief description of the property and **Current value of** Amount of the exemption you claim Specific laws that allow exemption line on Schedule A/B that lists this the portion you Check only one box for each exemption. property own Copy the value from Schedule A/B 735 ILCS 5/12-1001(b) Brief \$800.00 description: \checkmark \$800.00 **Used Electronics** 100% of fair market value, up to any I ine from applicable statutory limit Schedule A/B: 07 Brief 735 ILCS 5/12-1001(a) \$150.00 description: **✓** \$150.00 **Used Clothing** 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: Brief 735 ILCS 5/12-1001(b) description: \$0.00 \checkmark Checking account, 100% of fair market value, up to any Chase Bank applicable statutory limit Line from Schedule A/B: 735 ILCS 5/12-1001(b) Brief description: \$31.81 $\overline{}$ \$31.81 Other financial account, 100% of fair market value, up to any **Bank of America** applicable statutory limit PrePaid card Line from Schedule A/B: 735 ILCS 5/12-1001(c); 735 ILCS Brief \$450.00 5/12-1001(b) description: \$450.00; \$0.00 Saturn Vue, 2003, 2003

100% of fair market value, up to any

applicable statutory limit

Saturn Vue

03

Line from Schedule A/B:

Case 18-12860 Doc 1 Filed 05/01/18 Entered 05/01/18 19:10:36 Desc Main Document Page 22 of 74

| | | DC | cument Page 22 01 | 74 | | |
|--------------------------------|--|-----------------------------|--|---|---|------------------------------------|
| Fill in this i | nformation to identify your ca | se: | | | | |
| Debtor 1 | Sherral | А | Banks | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 (Spouse, if filing | ng) First Name | Middle Name | Last Name | | | |
| United Stat | tes Bankruptcy Court for the: | Northern | District of Illinois | | | |
| Case numb | oer | | (State) | | | |
| Officia | al Form 106D | | | J | | Check if this is an amended filing |
| Sche | dule D: Credito | ors Who Ha | ve Claims Secure | ed by Prop | erty | 12/15 |
| more space | e is needed, copy the Additio case number (if known). | onal Page, fill it out, nur | e are filing together, both are equ nber the entries, and attach it to t | | | |
| | ny creditors have claims se | | | | | |
| | No. Check this box and subm | nit this form to the court | with your other schedules. You hav | e nothing else to repo | ort on this form. | |
| ✓ Y | es. Fill in all of the informatior | n below. | | | | |
| Part 1: L | ist All Secured Claims | | | | | |
| 2. List sepa | art 2. As much as possible, list | nan one creditor has a par | cured claim, list the creditor ticular claim, list the other creditors order according to the creditor's | Column A Amount of claim Do not deduct the value of collateral. | Column B Value of collateral that supports this claim | Column C Unsecured portion If any |
| | Car Store Auto Corp | Describe the property | that secures the claim: | \$5,000.00 | \$6,000.00 | \$0.00 |
| | itor's Name ' S Lake St | 2013 Nissan Altima | | | | |
| | Number Street | | , the claim is: Check all that apply. | | | |
| | | Contingent | | | | |
| Aure | | Unliquidated | | | | |
| City | State ZIP Code o owes the debt? Check one. | Disputed | | | | |
| | Debtor 1 only | Nature of lien. Check a | all that apply. | | | |
| Ë | Debtor 2 only | An agreement you car loan) | made (such as mortgage or secured | | | |
| ⊢ | Debtor 1 and Debtor 2 only | Statutory lien (such | as tax lien, mechanic's lien) | | | |
| | At least one of the debtors and another | Judgment lien from | n a lawsuit | | | |
| | Check if this claim relates to a community debt | Other (including a r | ight to offset) | | | |
| | e debt was <u>2/2016</u> urred | Last 4 digits of accou | nt number | | | |

Add the dollar value of your entries in Column A on this page. Write that number

here:

\$5,000.00

Case 18-12860 Doc 1 Filed 05/01/18 Entered 05/01/18 19:10:36 Desc Main Document Page 23 of 74

| Fill in this infor | mation to identify your ca | se: | | | |
|---|---|--|--|--|--|
| Debtor 1 | Sherral | Α | Banks | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | First Name | NAC-L-III - NI | Leat Maria | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | |
| United States I | Sankruptcy Court for the: | Northern | District of Illinois | | |
| Case number | | | (State) | | |
| (If known) | | | | — | |
| Official F | orm 106E/F | | | | Check if this is an amended filing |
| Sched | ule E/F: Cre | ditors Who | Have Unsecu | ured Claims | 12/15 |
| other party to Form 106A/B) claims that are | any executory contracts and on Schedule G: Exec e listed in Schedule D: Cr | or unexpired leases that cutory Contracts and Une reditors Who Hold Claims | could result in a claim. Als xpired Leases (Official Ford Secured by Property. If mo | so list executory contracts on 106G). Do not include an ore space is needed, copy t | NONPRIORITY claims. List the on Schedule A/B: Property (Official y creditors with partially secured he Part you need, fill it out, number rite your name and case number (if |
| Part 1: List | All of Your PRIORITY | Unsecured Claims | | | |
| 1. Do any c | reditors have priority uns | secured claims against yo | ou? | | |
| ✓ No. | Go to Part 2. | | | | |
| Yes. | | | | | |
| listed, ide As much | ntify what type of claim it is as possible, list the claims ion Page of Part 1. If more | s. If a claim has both priority in alphabetical order accord | y and nonpriority amounts, list ling to the creditor's name. If particular claim, list the other o | st that claim here and show b you have more than two prio creditors in Part 3. | arately for each claim. For each claim oth priority and nonpriority amounts. writy unsecured claims, fill out the |

Total

claim

Priority

amount

Nonpriority

amount

Case 18-12860 Doc 1 Filed 05/01/18 Entered 05/01/18 19:10:36 Desc Main Document Page 24 of 74

| Debto | r 1 Sherral First Name | A Middle Name | Banks Last Name | Case number (if known) | |
|--------|--|---|---|--|-------------------|
| Part 2 | List All of Your NON | IPRIORITY Unsecured | d Claims | | |
| 4. Li | Yes. Ist all of your nonpriority unsecured claim, list the cred | to report in this part. Subs unsecured claims in the a itor separately for each clain | nit this form to the alphabetical orde n. For each claim li | e court with your other schedules. r of the creditor who holds each claim. If a creditor has more sted, identify what type of claim it is. Do not list claims already in Part 3.If you have more than four priority unsecured claims fill ou | cluded in Part 1. |
| | | | | | Total claim |
| 4.1 | ADT Nonpriority Creditor's Name PO Box 6504845 Number Street | | | When was the debt incurred? As of the date you file, the claim is: Check all that apply. | \$400.00 |
| | Dallas City Who incurred the debt? (✓ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 ☐ At least one of the deb ☐ Check if this claim re Is the claim subject to of ✓ No | Check one. only tors and another | Code | Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify | |
| | Yes | | | | |
| 4.2 | Is the claim subject to of No Yes | Illinois 606: State Zip (Check one. only tors and another elates to a community de | 22 Code | When was the debt incurred? 3/2013 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts 001 Collection; Collecting for ORIGINAL CREDITOR: MEDICAL Other. Specify PAYMENT DATA | \$266.00 |
| 4.3 | ATG CREDIT Nonpriority Creditor's Name 1700 W CORTLAND ST ST Number Street | TE 2 | | When was the debt incurred? 12/2011 As of the date you file, the claim is: Check all that apply. Contingent | \$141.00 |
| | CHICAGO City Who incurred the debt? (Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 At least one of the deb Check if this claim re Is the claim subject to of No Yes | Check one. only tors and another | Code | Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts 001 Collection; Collecting for ORIGINAL CREDITOR: MEDICAL Other. Specify PAYMENT DATA | |

Case 18-12860 Doc 1 Filed 05/01/18 Entered 05/01/18 19:10:36 Desc Main Document Page 25 of 74

Debtor 1 Sherral A Banks Case number (if known)
First Name Middle Name Last Name

Your NONDRIGHTY Uncoursed Claims Continuation Page

| Part 2 | Your NONPRIORITY Unsecured Claims - Continuation | n Page | |
|--------|--|--|-------------|
| | After listing any entries on this page, number them beginning wi | th 4.5, followed by 4.6, and so forth. | Total claim |
| 4.4 | CAPITALONE | - Last 4 digits of account number 2362 | \$297.00 |
| | Nonpriority Creditor's Name PO BOX 30253 | When was the debt incurred? 8/2017 | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | SALT LAKE CITY Utah 84130 | - Unliquidated | |
| | City State Zip Code Who incurred the debt? Check one. | Disputed | |
| | Debtor 1 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | Student loans | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or | |
| | At least one of the debtors and another | divorce that you did not report as priority claims | |
| | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | Other. Specify CreditCard | |
| | ✓ No | _ | |
| | Yes | | |
| 4.5 | Chase | - Last 4 digits of account number | \$1,500.00 |
| | Nonpriority Creditor's Name P.O. Box 740933 | When was the debt incurred? | |
| | Number Street | | |
| | attn -Bankruptcy Department | As of the date you file, the claim is: Check all that apply. - Contingent | |
| | | Unliquidated | |
| | dallas Texas 75374 City State Zip Code | Disputed | |
| | Who incurred the debt? Check one. | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 only | Student loans | |
| | Debtor 2 only | Obligations arising out of a separation agreement or | |
| | Debtor 1 and Debtor 2 only | divorce that you did not report as priority claims | |
| | At least one of the debtors and another | Debts to pension or profit-sharing plans, and other similar debts | |
| | Check if this claim relates to a community debt | Other. Specify debt | |
| | Is the claim subject to offset? | _ | |
| | ✓ No | | |
| | Yes | | |
| 4.6 | CHASE CARD Nonpriority Creditor's Name | - Last 4 digits of account number 9808 | \$695.00 |
| | BANK ONE CARD SERV 2500 WESTFIELD DRI | When was the debt incurred? 10/2016 | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | ELGIN Illinois 60124 City State Zip Code | - Unliquidated | |
| | Who incurred the debt? Check one. | Disputed | |
| | Debtor 1 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | Student loans | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or | |
| | At least one of the debtors and another | divorce that you did not report as priority claims | |
| | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | Other. Specify CreditCard | |
| | ✓ No | | |
| | Yes | | |

Case 18-12860 Doc 1 Filed 05/01/18 Entered 05/01/18 19:10:36 Desc Main Document Page 26 of 74

Debtor 1 Sherral A Banks Case number (if known) Irist Name Middle Name Last Name

| Part 2 | Downer Place Downer Place Description for Continuence Street As of the date you file, the claim is: Check all that apply. Contingent Uniquidated Disputed Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 3 only Debtor 4 test one of the debtors and another Debtor 5 treet Debtor 6 this claim relates to a community debt Debtor 7 Street Debtor 8 of Chicago - Dep't of Revenue Debtor 9 Street Debtor 1 only Debtor 2 only Debtor 3 Street Debtor 4 dillinois Debtor 5 treet Debtor 6 one Debtor 6 one Debtor 7 one Debtor 8 of the date you file, the claim is: Check all that apply. Contingent Debtor 8 of the date you file, the claim is: Check all that apply. Contingent Debtor 9 one Debtor 1 only Debtor 2 only Debtor 3 one Debtor 4 only Debtor 5 one Debtor 6 one Debtor 7 only Debtor 9 one Debtor 1 only Debtor 9 one Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 6 of the debtors and another Debtor 1 only Debtor 1 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 6 only Debtor 6 only Debtor 7 only Debtor 8 only Debtor 9 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 6 only Debtor 6 only Debtor 7 only Debtor 8 only Debtor 9 only Debtor 9 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 6 only Debtor 7 only Debtor 8 only Debtor 9 only Debtor 9 only Debtor 9 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor | | | |
|--------|--|--|-------------|--|
| | After listing any entries on this page, number them beginning w | ith 4.5, followed by 4.6, and so forth. | Total claim | |
| 4.7 | City of Aurora | Last 4 digits of account number | \$700.00 | |
| | 44 E Downer Place | When was the debt incurred?n/a | | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | | |
| | | - Contingent | | |
| | Aurora Illinois 60507 | Unliquidated | | |
| | City State Zip Code | Disputed | | |
| | Who incurred the debt? Check one. Debtor 1 only | Type of NONPRIORITY unsecured claim: | | |
| | Debtor 2 only | Student loans | | |
| | Debtor 1 and Debtor 2 only | | | |
| | At least one of the debtors and another | | | |
| | Check if this claim relates to a community debt | | | |
| | Is the claim subject to offset? | | | |
| | ✓ No | | | |
| | Yes | | | |
| 4.8 | City of Chicago - Dep't of Revenue Nonpriority Creditor's Name | Last 4 digits of account number | \$600.00 | |
| | PO Box 88292 | When was the debt incurred?n/a | | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | | |
| | | - Contingent | | |
| | Chicago Illinois 60608 | Unliquidated | | |
| | , | Disputed | | |
| | Debtor 1 only | Type of NONPRIORITY unsecured claim: | | |
| | Debtor 2 only | Student loans | | |
| | Debtor 1 and Debtor 2 only | | | |
| | At least one of the debtors and another | _ | | |
| | Check if this claim relates to a community debt | | | |
| | Is the claim subject to offset? | Other. Specify Fairing tickets | | |
| | ✓ No | | | |
| | Yes | | | |
| 4.9 | ComEd | Last 4 digits of account number | \$150.00 | |
| | Nonpriority Creditor's Name 3 Lincoln Center | When was the debt incurred? | | |
| | Number Street | | | |
| | Bankruptcy Section | As of the date you file, the claim is: Check all that apply. — Contingent | | |
| | | Unliquidated | | |
| | Oakbrook Terrace Illinois 60181 City State Zip Code | Disputed | | |
| | Who incurred the debt? Check one. | Type of NONPRIORITY unsecured claim: | | |
| | Debtor 1 only | Student loans | | |
| | Debtor 2 only | Obligations arising out of a separation agreement or | | |
| | Debtor 1 and Debtor 2 only | divorce that you did not report as priority claims | | |
| | At least one of the debtors and another | Debts to pension or profit-sharing plans, and other similar debts | | |
| | Check if this claim relates to a community debt | ✓ Other. Specify debt | | |
| | Is the claim subject to offset? | | | |
| | ✓ No | | | |
| | Yes | | | |

Case 18-12860 Doc 1 Filed 05/01/18 Entered 05/01/18 19:10:36 Desc Main Document Page 27 of 74

Banks Debtor 1 Sherral Case number (if known) First Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.10 CONVERGENT OUTSOURCING \$784.00 Last 4 digits of account number 2779 Nonpriority Creditor's Name 10750 HAMMERLY BLVD #200 When was the debt incurred? 2/2018 Number Street As of the date you file, the claim is: Check all that apply. Contingent 77043 Houston Texas Unliquidated State Zip Code City Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt 001 Collection; Collecting for Is the claim subject to offset? Other. Specify ORIGINAL CREDITOR: DIRECTV **✓** No Yes 4.11 Credit Collection Services \$170.00 Last 4 digits of account number Nonpriority Creditor's Name 725 Canton St When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Massachusetts 02062 Norwood City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify _ Collecting for Geico Is the claim subject to offset? **✓** No Yes CREDMGMTCNTL \$140.00 Last 4 digits of account number 6134 Nonpriority Creditor's Name When was the debt incurred? 1/2017 P.O. BOX 1654 Number Street As of the date you file, the claim is: Check all that apply. Contingent **GREEN BAY** Wisconsin 54301 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or At least one of the debtors and another divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts

✓ No

Is the claim subject to offset?

V

Other. Specify

Collection; Collecting for

ORIGINAL CREDITOR: 01

SPRING GREEN LAWN CARE

Case 18-12860 Doc 1 Filed 05/01/18 Entered 05/01/18 19:10:36 Desc Main Document Page 28 of 74

Banks Debtor 1 Sherral Case number (if known) First Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** DEPT OF EDUCATION/NELN 4.13 \$7,036.00 - Last 4 digits of account number 9472 Nonpriority Creditor's Name 121 S 13TH ST When was the debt incurred? 9/2013 Number Street As of the date you file, the claim is: Check all that apply. Contingent LINCOLN 68508 Nebraska Unliquidated State Zip Code City Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify Is the claim subject to offset? **✓** No Yes 4.14 DEPT OF EDUCATION/NELN \$4,764.00 Last 4 digits of account number Nonpriority Creditor's Name 121 S 13TH ST When was the debt incurred? 3/2010 Number Street As of the date you file, the claim is: Check all that apply. Contingent LINCOLN Nebraska 68508 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify Is the claim subject to offset? **✓** No Yes 4.15 DEPT OF EDUCATION/NELN \$3,992.00 Last 4 digits of account number 9572 Nonpriority Creditor's Name When was the debt incurred? 9/2013 121 S 13TH ST Number As of the date you file, the claim is: Check all that apply. Contingent 68508 LINCOLN Nebraska Unliquidated State Zip Code City Disputed Who incurred the debt? Check one. Debtor 1 only ◪ Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts

No Yes

Is the claim subject to offset?

Other. Specify

Case 18-12860 Doc 1 Filed 05/01/18 Entered 05/01/18 19:10:36 Desc Main Document Page 29 of 74

Debtor 1 Sherral Banks Case number (if known) First Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.16 DEPT OF EDUCATION/NELN \$2,342.00 5872 Last 4 digits of account number Nonpriority Creditor's Name 121 S 13TH ST When was the debt incurred? 3/2010 Number Street As of the date you file, the claim is: Check all that apply. Contingent LINCOLN 68508 Nebraska Unliquidated State Zip Code City Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify Is the claim subject to offset? **✓** No Yes 4.17 ENHANCED RECOVERY CO L \$918.00 0723 Last 4 digits of account number Nonpriority Creditor's Name 8014 BAYBERRY RD When was the debt incurred? 3/2015 Number Street As of the date you file, the claim is: Check all that apply. Contingent **JACKSONVILLE** Florida 32256 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt 001 Collection; Collecting for Is the claim subject to offset? |✓| ORIGINAL CREDITOR: AT T U-**✓** No Other. Specify **VERSE** Yes 4.18 Municipal Collections of America \$75.00 Last 4 digits of account number Nonpriority Creditor's Name 3348 Ridge Rd. When was the debt incurred? n/a Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated <u>Lans</u>ing Illinois 60438 City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts

✓ No Yes

Check if this claim relates to a community debt

Is the claim subject to offset?

Other. Specify

collecting for city of Aurora

Case 18-12860 Doc 1 Filed 05/01/18 Entered 05/01/18 19:10:36 Desc Main Document Page 30 of 74

Banks Debtor 1 Sherral Case number (if known) First Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.19 Nicor - PO Box 5407 \$500.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? n/a PO Box 5407 Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60197 Carol Stream Illinois City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify _ debt Is the claim subject to offset? No Yes Rasmussen College \$300.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? n/a 2363 Sequoia Dr. As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Aurora Illinois 60506 Disputed City State Zip Code Who incurred the debt? Check one Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify debt Is the claim subject to offset? **✓** No Yes Village of South Chicago Heights 4.21 \$100.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 3317 Chicago Road Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Chicago Heights Illinois 60411 City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify Red Light Camera Ticket Is the claim subject to offset? **V** No

Yes

Case 18-12860 Doc 1 Filed 05/01/18 Entered 05/01/18 19:10:36 Desc Main Document Page 31 of 74

Debtor 1 Sherral Banks Case number (if known) First Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.22 Waubonsee Community College \$1,000.00 - Last 4 digits of account number Nonpriority Creditor's Name Route 47 Waubonsee Drive When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Illinois 60554 Sugar Grove Disputed City State Zip Code Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify _ debt Is the claim subject to offset? **✓** No Yes

Case 18-12860 Doc 1 Filed 05/01/18 Entered 05/01/18 19:10:36 Desc Main Document Page 32 of 74

| tor 1 | Sherral | | A | Banks | Case | number (if known) | | | |
|---------------|-----------------------------------|-------------------------------------|--|---------------------|---|---|--|--|--|
| F | First Name | | Middle Name | Last Name | | | | | |
| : 3: L | List Others to | Be Notified A | bout a Debt Tha | t You Already List | ed | | | | |
| colle | ction agency is ction agency h | trying to collective. Similarly, it | ct from you for a de you have more th | ebt you owe to some | one else, list the ny of the debts th | ou already listed in Parts 1 or 2. For example, if a original creditor in Parts 1 or 2, then list the at you listed in Parts 1 or 2, list the additional or 2, do not fill out or submit this page. | | | |
| Arno Name | ld Scott Harris | | | On which ent | ry in Part 1 or Pa | rt 2 did you list the original creditor? | | | |
| 111 | W. Jackson # 60 | 00 | | Line 4.8 | of (Check one): | Part 1: Creditors with Priority Unsecured Claims | | | |
| Number Street | | | | | Part 2: Creditors with Nonpriority Unsecured Claims | | | | |
| Chica | ago | Illinois | 60604 | Last 4 digits of | of account number | iher | | | |
| City | | State | Zip Code | | | ·· | | | |
| Geico | o Casualty Comp | oany | | On which ent | ry in Part 1 or Pa | rt 2 did you list the original creditor? | | | |
| One | Geico Center | | | Line 4.11 | of (Check | Part 1: Creditors with Priority Unsecured Claims | | | |
| Num | ber Street | | | | one): | Part 2: Creditors with Nonpriority Unsecured Claims | | | |
| Maco | on | Georgia | 31296 | Last 4 digits of | of account number | er . | | | |
| City | | State | Zip Code | | | ·· | | | |

Case 18-12860 Doc 1 Filed 05/01/18 Entered 05/01/18 19:10:36 Desc Main Page 33 of 74 Document

Banks Last Name Case number (if known) Debtor 1 Sherral First Name

| Part 4: Add th | ne Amounts for Each Type of Unsecured Claim | | | | | | | |
|---|---|-----|--------------|--|--|--|--|--|
| 6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. | | | | | | | | |
| | | | Total claims | | | | | |
| Total claims from Part 1 | 6a. Domestic support obligations. | 6a. | \$0.00 | | | | | |
| | 6b. Taxes and certain other debts you owe the government | 6b. | \$0.00 | | | | | |
| | 6c. Claims for death or personal injury while you were intoxicated | 6c. | \$0.00 | | | | | |
| | 6d. Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$0.00 | | | | | |
| | 6e. Total. Add lines 6a through 6d. | 6e. | \$0.00 | | | | | |
| | | | Total claims | | | | | |
| Total claims from Part 2 | 6f. Student loans | 6f. | \$18,134.00 | | | | | |
| | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | \$0.00 | | | | | |
| | 6h. Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$0.00 | | | | | |
| | 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$8,736.00 | | | | | |
| | 6j. Total. Add lines 6f through 6i. | 6j. | \$26,870.00 | | | | | |

Case 18-12860 Doc 1 Filed 05/01/18 Entered 05/01/18 19:10:36 Desc Main Document Page 34 of 74

| Fill in this information to identify your case: | | | | | | | | |
|---|------------|-------------|----------------------|--|--|--|--|--|
| Debtor 1 | Sherral | Α | Banks | | | | | |
| | First Name | Middle Name | Last Name | | | | | |
| Debtor 2 | | | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | | | |
| United States Bankruptcy Court for the: | | Northern | District of Illinois | | | | | |
| | | | (State) | | | | | |
| Case number (If known) | - | _ | _ | | | | | |

Official Form 106G

Check if this is an amended filing

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or company with whom you have the contract or lea Aurora Housing Authority Name 1449 Jericho Cir Number Street Aurora Illinois 60506 | | the contract or lease | State what the contract or lease is for |
|-----|--|----------|-----------------------|---|
| 2.1 | Name | , | | Residential Lease, Debtor is Lessee, Year Residential Lease |
| | | | | |
| | Aurora | Illinois | 60506 | |
| | City | State | Zip Code | |

Case 18-12860 Doc 1 Filed 05/01/18 Entered 05/01/18 19:10:36 Desc Main Document Page 35 of 74

| | | | · · | | |
|---------------------------------|---|---|----------------------------|--------------|---|
| Fill in this infor | mation to identify your c | ase: | | | |
| Debtor 1 | Sherral | Α | Banks | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | | |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois | | |
| | , , | - | (State) | | |
| Case number (If known) | | | | | |
| | | | | | Check if this is an amended filing |
| Official | Form 106H | | | | |
| Schedul | e H: Your Coc | lebtors | | | 12/15 |
| | er every question. ave any codebtors? (If yo | ou are filing a joint case, do | not list either spouse as | a codebtor.) | |
| Idaho, Lo | | lived in a community proxico, Puerto Rico, Texas, W | | | nity property states and territories include Arizona, California, |
| | Did your spouse, forme | er spouse, or legal equiva | alent live with you at the | time? | |
| | | y state or territory did yo | u live? | Fill in tl | he name and current address of that person. |
| | Name of your spouse, f | ormer spouse, or legal equ | ivalent | | |
| | Number Street | | | | |
| | City | State | Zip C | ode | |
| | | - | - | | use is filing with you. List the person shown in line 2 |

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line a again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G to fill out Column 2.

Column 1: Your codebtor

Check all schedules that apply:

Case 18-12860 Doc 1 Filed 05/01/18 Entered 05/01/18 19:10:36 Desc Main Document Page 36 of 74

| | | | | | 5 | | | | |
|---|--|--|-----------------------|-----------|--------------|---------------|---|-----------|----------------|
| Fill in this in | formation to identify | your case: | | | | | | | |
| Debtor 1 | Sherral | Α | Banks | 3 | | | | | |
| 20010. | First Name | Middle Name | Last N | | | Che | eck if this is: | | |
| Debtor 2 | | | | | | | An amended filing | | |
| (Spouse, if filing | First Name | Middle Name | Last N | lame | | | • | | |
| | Bankruptcy Court for | Northern | District of III | | | | A supplement showing perpenses as of the follow | | |
| the: Case number | | | (5 | State) | | | | vii ig da | |
| (If known) | - | | | | | | MM / DD / YYYY | | |
| Official | Form 106I | | | | | | | | |
| | le I: Your In | come | | | | | | | 12/ |
| information a spouse. If mo number (if kr | about your spouse. I | | d your spou | se is r | not filing v | vith you, do | not include informati | ion abo | out your |
| | ır employment | | Debtor 1 | 1 | | | Debtor 2 | | |
| informati | on. | Employment status | ✓ Emplo | E England | | | - Employed | | |
| - | e more than one job, eparate page with | ,, | | mploye | nd | | Employed Not Employed | | |
| informatio | n about additional | | _ | | | | Not Employed | | |
| employers | | Occupation | Senior Shi | ift Lead | | | _ | | |
| Include pa self-emplo | art time, seasonal, or | Employer's name | Sundance | Inc | | | | | |
| | | Employer's address | 7915 Kensington Court | | | | | | |
| • | n may include student aker, if it applies. | | Number Street | | | Number Street | | | |
| | | | Brighton | | Michigan | 48116 | | | |
| | | | City | | State | Zip Code | City | State | Zip Code |
| | | How long employed there? | | | | | | | |
| Part 2: Giv | ∕e Details About N | Nonthly Income | | | | | | | |
| spouse unles | ss you are separated. | the date you file this form | • | | | • | · | • | |
| | attach a separate she | e more than one employer, et to this form. | Combine the | IIIIOIII | For De | | For Debtor 2 or | s pelov | v. II you need |
| | | | | | roi De | | non-filing spouse | | |
| | | ary, and commissions (before, calculate what the monthly | | 2 | | \$2,978.58 | | = | |
| 3. Estimat | e and list monthly ove | rtime pay. | | 3. | | + \$0.00 | | _ | |
| 4. Calcula | te gross income. Add I | ine 2 + line 3. | | 4. | | \$2,978.58 | | | |

Case 18-12860 Doc 1 Filed 05/01/18 Entered 05/01/18 19:10:36 Desc Main Document Page 37 of 74

| Dept | or 1Sherral First Name | | nks st Name | | Case number | (if | | |
|----------------|--|---|----------------|------------|------------------------|-----------------------------------|----------|---------------------|
| | riist Name | Miloule Name Las | st name | | known) For Debtor 1 | For Debtor 2 or non-filing spouse | | |
| Co | py line 4 here | | → 4. | | \$2,978.58 | | | |
| | st all payroll dedu | | | | | | | |
| | | and Social Security deductions | 5 <i>a</i> | ١. | \$342.31 | | | |
| | | tributions for retirement plans | 5b |). | \$0.00 | | | |
| | • | ributions for retirement plans | 50 | ; <u>.</u> | \$0.00 | | | |
| | • | ments of retirement fund loans | 50 | | \$0.00 | | | |
| | . Insurance | | 5e | | \$0.00 | | | |
| | . Domestic suppo | ort obligations | 5f | | \$0.00 | | | |
| | . Union dues | | 50 | | \$0.00 | | | |
| _ | | ons. Specify: | _ | 1. + | \$0.00 + | | | |
| | | luctions. Add lines 5a + 5b + 5c + 5d + 5e +5f + | | | \$342.31 | | | |
| 7. C a | lculate total mor | nthly take-home pay. Subtract line 6 from line 4 | . 7. | | \$2,636.27 | | | |
| 8. Lis | at all other incom | e regularly received: | | | | | | |
| 88 | business, profe | • | | | | | | |
| | | ent for each property and business showing rdinary and necessary business expenses, and ret income. | 8a | l. | \$0.00 | | | |
| 8b | . Interest and div | vidends | 8b |). | \$0.00 | | | |
| 80 | . Family support dependent regu | payments that you, a non-filing spouse, or a ularly receive | | | _ | | | |
| | | spousal support, child support, maintenance, nt, and property settlement. | 80 | ; <u>.</u> | \$0.00 | | | |
| 80 | d. Unemployment | compensation | 80 | l. | \$0.00 | | | |
| 86 | . Social Security | | 86 |). | \$0.00 | | | |
| 8f | Include cash ass cash assistance t | ent assistance that you regularly receive istance and the value (if known) of any non-that you receive, such as food stamps (benefits emental Nutrition Assistance Program) or es | 8f | | \$0.00 | | | |
| 80 | Pension or reti | rement income | 80 | | \$0.00 | | | |
| | | income. Specify: | _ |) 1. + | \$0.00 + | | | |
| | • | ne Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8 | | | \$0.00 | | | |
| 10. C a | alculate monthly | income. Add line 7 + line 9. | 10 | ا ا. | \$2,636.27 + | |]] = | \$2,636.27 |
| Ac | ld the entries in lin | e 10 for Debtor 1 and Debtor 2 or non-filing spo | use | | . , | | j | |
| In frie | clude contribution ends or relatives. | ular contributions to the expenses that you I is from an unmarried partner, members of your horamounts already included in lines 2-10 or amounts | ousehold, | your | dependents, your roomm | | | |
| Sp | ecify: | | | | | | 11. + | \$0.00 |
| | | n the last column of line 10 to the amount in In the Summary of Schedules and Statistical Summ | | | | | 12. | \$2,636.27 Combined |
| 13. D | No. | increase or decrease within the year after yo | u file this | form | ? | | | monthly income |
| L | Yes. Explain: | | | | | | | |

Case 18-12860 Doc 1 Filed 05/01/18 Entered 05/01/18 19:10:36 Desc Main Document Page 38 of 74

| Fill in this infor | mation to identify you | ir casa. | | | | |
|--------------------------|--|---|---|--------------------|--|--------------|
| | | | | | | |
| Debtor 1 | Sherral First Name | A Middle Name | Banks Last Name | | | |
| Debtor 2 | | | | Check if this is: | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | An amended filir | ıg | |
| United States 6 | Bankruptcy Court for th | e: Northern E | District of Illinois (State) | | howing post-peti the following date | |
| Case number | | | | | | |
| (II KNOWN) | | | | MM / DD / YYYY | , | |
| Official | Form 106J | | | | | |
| Schodul | e J: Your Ex | noncoc | | | | 12/15 |
| | | - | | | | 12/13 |
| information. If | | | e filing together, both are equally form. On the top of any additiona | | | number |
| Part 1: Des | cribe Your Housel | nold | | | | |
| 1. Is this a joi | nt case? | | | | | |
| ✓ No. Go | o to line 2 | | | | | |
| Yes. D | oes Debtor 2 live in a | separate household? | | | | |
| | ■ No | | | | | |
| L | | t file Official Forms 106 L-2 <i>Evnen</i> | ses for Separate Household of Debto | nr 2 | | |
| 0.0. | | · | ses for deparate Flouserfold of Debit | | | |
| - | e dependents? | No | | | | |
| Do not list Debtor 2. | Debtor 1 and | Yes. Fill out this information for each dependent | Dependent's relationship to Debtor 1 or Debtor 2 | Dependent's age | Does depend with you? | dent live |
| | | *************************************** | Child | 3 | No. | |
| | | | | | ✓ Yes. | |
| | | | Child | | No. | |
| | | | | | Yes. | |
| | | | Child | | No. | |
| | | | | | ✓ Yes. | |
| | penses include of people other | No | | | | |
| than | <u> </u> | Yes | | | | |
| yourself an dependent | - | | | | | |
| | | a Monthly Consers | | | | |
| Part 2: Esti | mate Your Ongoin | g Monthly Expenses | | | | |
| _ | of a date after the ba | | ou are using this form as a supple plemental Schedule J, check the | | | |
| | | n-cash government assistance i d it on <i>Schedule I: Your Incom</i> e | | | Yo | our expenses |
| | I or home ownership or the ground or lot. 4. | | clude first mortgage payments and | | 4. | \$677.00 |
| If not inc | luded in line 4: | | | | | |
| 4a. Real e | state taxes | | | | 4a | \$0.00 |
| 4b. Prope | rty, homeowner's, or re | enter's insurance | | | 4b. | \$0.00 |
| 4c. Home | maintenance, repair, a | nd upkeep expenses | | | 4c. | \$0.00 |

4d.

\$0.00

4d. Homeowner's association or condominium dues

Case 18-12860 Doc 1 Filed 05/01/18 Entered 05/01/18 19:10:36 Desc Main Document Page 39 of 74

Debtor 1 Sherral A Banks Case number (if known)
First Name Middle Name Last Name

| 5. Additional mortgage payments for your residence, such as home equity loans 6. Utilities: 6a. Electricity, heat, natural gas 6a. 6b. Water, sewer, garbage collection 6c. Telephone, cell phone, Internet, satellite, and cable services 6d. Other. Specify: 7. Food and housekeeping supplies 8. Childcare and children's education costs 9. Clothing, laundry, and dry cleaning 10. Personal care products and services 5. 6a. 6b. 6c. 6d. 7. 8. Childcare and children's education costs 9. | \$0.00 \$170.00 \$25.00 \$250.00 \$0.00 \$690.00 \$40.00 \$50.00 \$25.00 \$200.00 |
|---|--|
| 6. Utilities: 6a. Electricity, heat, natural gas 6a. Electricity, heat, natural gas 6b. Water, sewer, garbage collection 6c. Telephone, cell phone, Internet, satellite, and cable services 6d. Other. Specify: 6d 7. Food and housekeeping supplies 7. 8. Childcare and children's education costs 9. Clothing, laundry, and dry cleaning 9. | \$170.00 \$25.00 \$250.00 \$0.00 \$690.00 \$40.00 \$50.00 \$25.00 |
| 6a. Electricity, heat, natural gas 6b. Water, sewer, garbage collection 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. 6d. Other. Specify: 6d 7. Food and housekeeping supplies 7. 8. Childcare and children's education costs 9. Clothing, laundry, and dry cleaning 9. | \$25.00 \$250.00 \$0.00 \$690.00 \$0.00 \$40.00 \$50.00 |
| 6b. Water, sewer, garbage collection 6b. 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. 6d. Other. Specify: 7. Food and housekeeping supplies 7. 8. Childcare and children's education costs 8. 9. Clothing, laundry, and dry cleaning 9. | \$25.00 \$250.00 \$0.00 \$690.00 \$0.00 \$40.00 \$50.00 |
| 6c. Telephone, cell phone, Internet, satellite, and cable services 6d. Other. Specify: 6d 7. Food and housekeeping supplies 7. 8. Childcare and children's education costs 9. Clothing, laundry, and dry cleaning 9. | \$250.00 \$0.00 \$690.00 \$0.00 \$40.00 \$50.00 |
| 6d. Other. Specify: 6d 7. Food and housekeeping supplies 8. Childcare and children's education costs 9. Clothing, laundry, and dry cleaning 9. | \$0.00 \$690.00 \$0.00 \$40.00 \$50.00 |
| 7. Food and housekeeping supplies 8. Childcare and children's education costs 9. Clothing, laundry, and dry cleaning 9. | \$690.00 \$0.00 \$40.00 \$50.00 \$25.00 |
| 7. Food and housekeeping supplies 8. Childcare and children's education costs 9. Clothing, laundry, and dry cleaning 9. | \$0.00 \$40.00 \$50.00 \$25.00 |
| 9. Clothing, laundry, and dry cleaning 9. | \$40.00 \$50.00 \$25.00 |
| | \$50.00 \$25.00 |
| 10. Personal care products and services 10. | \$25.00 |
| | |
| 11. Medical and dental expenses | \$200.00 |
| 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments | |
| 13. Entertainment, clubs, recreation, newspapers, magazines, and books | \$0.00 |
| 14. Charitable contributions and religious donations 14. | \$0.00 |
| 15. Insurance.Do not include insurance deducted from your pay or included in lines 4 or 20. | |
| 15a. Life insurance | \$39.00 |
| 15b. Health insurance 15b | \$0.00 |
| 15c. Vehicle insurance | \$170.00 |
| 15d. Other insurance. Specify: 15d | \$0.00 |
| 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. | |
| Specify: | \$0.00 |
| 17. Installment or lease payments: | |
| 17a. Car payments for Vehicle 1 | \$0.00 |
| 17b. Car payments for Vehicle 2 | \$0.00 |
| 17c. Other. Specify: 17c | \$0.00 |
| 17d. Other. Specify: 17d | \$0.00 |
| 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). | \$0.00 |
| 19. Other payments you make to support others who do not live with you. | |
| Specify: 19. | \$0.00 |
| 20.Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. | |
| 20a. Mortgages on other property 20a | \$0.00 |
| 20b. Real estate taxes. | \$0.00 |
| 20c. Property, homeowner's, or renter's insurance | \$0.00 |
| 20d. Maintenance, repair, and upkeep expenses. | \$0.00 |
| 20e. Homeowner's association or condominium dues 20e | \$0.00 |

Case 18-12860 Doc 1 Filed 05/01/18 Entered 05/01/18 19:10:36 Desc Main Document Page 40 of 74

| Debtor 1 Sh | nerral | Α | Banks | Case number (if known) | |
|---------------------|---------------------|---|-------------|------------------------|------------|
| Fir | st Name | Middle Name | Last Name | | |
| 21. Other. S | Specify: | | | 21 | \$0.00 |
| | | | | | |
| | ite your monthly | • | | | \$2,336.00 |
| | d lines 4 through 2 | | | | \$0.00 |
| | | ly expenses for Debtor 2), if any | | | \$2,336.00 |
| 22c. Add | d line 22a and 22b | o. The result is your monthly exp | penses. | 22. | |
| | te your monthly i | | | | |
| 23a. Cop | by line 12 (your co | ombined monthly income) from | Schedule I. | 23a | \$2,636.27 |
| 23b. Co | py your monthly e | expenses from line 22 above. | | 23b | \$2,336.00 |
| | | ly expenses from your monthly | income. | | \$300.27 |
| The | e result is your mo | onthly net income. | | 23c | |
| | ge payment to inc | ect to finish paying for your car rease or decrease because of a | | | |
| | Explain here | 9: | | | |

Case 18-12860 Doc 1 Filed 05/01/18 Entered 05/01/18 19:10:36 Desc Main Document Page 41 of 74

| Fill in this information to identify your case: | | | | | | | |
|---|---------------------------|-------------|------------------------------|--|--|--|--|
| Debtor 1 | Sherral | А | Banks | | | | |
| | First Name | Middle Name | Last Name | | | | |
| Debtor 2 | | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | | |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois (State) | | | | |
| Case number | - | | | | | | |

Official Form 106Dec

Check if this is an amended filing

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Par | t 1: Sign Below | |
|-----|--|--|
| | Did you pay or agree to pay someone who is NOT an attorney to h | nelp you fill out bankruptcy forms? |
| | ✓ No | |
| | Yes. Name of person | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |
| | | |
| | | |
| | Under penalty of perjury, I declare that I have read the summary that they are true and correct. | and schedules filed with this declaration and |
| | that they are true and correct. | |
| × | /s/ Sherral Banks | × |
| | Signature of Debtor 1 | Signature of Debtor 2 |
| | Date 5/1/2018 | Date |
| | MM/DD/YYYY | MM/DD/YYYY |

Case 18-12860 Doc 1 Filed 05/01/18 Entered 05/01/18 19:10:36 Desc Main Document Page 42 of 74

| e and accurate as po more space is need wn). Answer every q Details About Your | al Affairs fo essible. If two ma ed, attach a sepa question. | District of Illino (State) Dr Individuals rried people are filing trate sheet to this form | e is | y responsible for s | Check if this is a amended filing |
|---|--|---|--|---|--|
| First Name nkruptcy Court for the: FORM 107 It of Financia e and accurate as pomore space is need wn). Answer every of | Middle N Northern Al Affairs for ssible. If two marked, attach a separatestion. | District of Illino (State) Dr Individuals rried people are filing trate sheet to this form | Filing for Bankı | y responsible for s | amended filing |
| FORM 107 of Financia e and accurate as pomore space is needlewn). Answer every of | Northern Al Affairs for ssible. If two marked, attach a separatestion. | District of Illino (State | Filing for Bankı | y responsible for s | amended filing |
| FORM 107 It of Financia e and accurate as pomore space is needewn). Answer every of | al Affairs fo essible. If two ma ed, attach a sepa question. | Or Individuals rried people are filing trate sheet to this form | Filing for Bankı | y responsible for s | amended filing |
| e and accurate as po more space is need wn). Answer every o | essible. If two ma ed, attach a sepa Juestion. | or Individuals rried people are filing trate sheet to this form | Filing for Bankı | y responsible for s | amended filing |
| e and accurate as po more space is need wn). Answer every o | essible. If two ma ed, attach a sepa Juestion. | rried people are filing rate sheet to this form | together, both are equall | y responsible for s | amended filing |
| e and accurate as po more space is need wn). Answer every o | essible. If two ma ed, attach a sepa Juestion. | rried people are filing rate sheet to this form | together, both are equall | y responsible for s | amended filing |
| e and accurate as po more space is need wn). Answer every o | essible. If two ma ed, attach a sepa Juestion. | rried people are filing rate sheet to this form | together, both are equall | y responsible for s | |
| e and accurate as po more space is need wn). Answer every q Details About Your | essible. If two ma ed, attach a sepa Juestion. | rried people are filing rate sheet to this form | together, both are equall | y responsible for s | |
| more space is need wn). Answer every q Details About Your | ed, attach a sepa uestion. | rate sheet to this form | | | |
| Details About Your | | | | | |
| | Marital Status a | | | | |
| | | and Where You Lived | Before | | |
| our current marital st | atus? | | | | |
| ied | | | | | |
| narried | | | | | |
| | | | | | |
| e last 3 years, nave ye | ou lived anywnere | other than where you liv | /e now? | | |
| L'al all afilia al ann | | O D l l . l . | Lance Brown | | |
| List all of the places y | ou lived in the last | 3 years. Do not include v | wnere you live now. | | |
| or 1. | | Dates Debter 1 lived | Dobtor 2: | | Dates Debtor 2 lived |
| or 1. | | there | Debtor 2. | | there |
| | | | Same as Debtor 1 | | Same as Debtor 1 |
| Sadar Bu | | | | | |
| oer Street | • | From <u>04/2016</u> | Number Street | | From |
| | | To <u>05/2016</u> | | | To |
| ego Illinois | 60543 | | 011 | 7: 0 1 | |
| State | Zip Code | | | ZIP Code | Same as Debtor 1 |
| | | | Carrie as Debior 1 | | Same as Debtor 1 |
| Fox Point Dr per Street | | From 05/2015 | Number Street | | From |
| | | To <u>04/2016</u> | | | То |
| a Illinois | 60504 | | | | |
| State | Zip Code | | City State | Zip Code | |
| | ist all of the places your first all of the p | e last 3 years, have you lived anywhere List all of the places you lived in the last or 1: inden Dr. per Street go Illinois 60543 State Zip Code Fox Point Dr per Street a Illinois 60504 State Zip Code ast 8 years, did you ever live with a spo | plast 3 years, have you lived anywhere other than where you lived in the last 3 years. Do not include the places you lived in the last 3 years. Do not include the places you lived in the last 3 years. Do not include the portant of the places you lived in the last 3 years. Do not include the portant of the places you lived in the last 3 years. Do not include the portant of the places you lived in the last 3 years. Do not include the portant of the places of the places of the places you lived in the last 3 years. Do not include the places of th | List all of the places you lived in the last 3 years. Do not include where you live now. Dates Debtor 1 lived there Debtor 2: Dates Debtor 1 lived there Same as Debtor 1 | List all of the places you lived in the last 3 years. Do not include where you live now. Dates Debtor 1 lived there Debtor 2: Same as Debtor 1 Inden Dr. Der Street To 04/2016 To 05/2016 From 05/2015 To 04/2016 Number Street Same as Debtor 1 Number Street City State Zip Code Same as Debtor 1 Number Street Number Street |

Case 18-12860 Doc 1 Filed 05/01/18 Entered 05/01/18 19:10:36 Desc Main Document Page 43 of 74

| Debt | or 1 | Sherral A | Bank | | e numb | oer (if known) | |
|-------------|---------------------------------|--|--|--|-------------|--|--|
| | | | e Name Last N | vame | | | |
| Part | 2: | Explain the Sources of Your Inc | come | | | | |
| Fill | | you have any income from employm n the total amount of income you receiv rities. If you are filing a joint case and you No Yes. Fill in the details. | ved from all jobs and all bu | usinesses, including part-time | Э | | ars? |
| | | | Debtor 1 | | D | ebtor 2 | |
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | | ources of income heck all that apply. | Gross income (before deductions and exclusions) |
| | | om January 1 of current year until e date you filed for bankruptcy: | Wages, commissions, bonuses, tips Operating a business | \$10311.74 | | Wages, commissions, bonuses, tips Operating a business | |
| | | or last calendar year: anuary 1 to December 31, 2017) YYYY | Wages, commissions, bonuses, tips Operating a business | \$29090.00 | | Wages, commissions, bonuses, tips Operating a business | |
| | | or the calendar year before that: anuary 1 to December 31, 2016) YYYY | Wages, commissions, bonuses, tips Operating a business | \$27356.00 | | Wages, commissions, bonuses, tips Operating a business | |
| I F f | nclu oubli iling ist e | you receive any other income during de income regardless of whether that in ic benefit payments; pensions; rental in a joint case and you have income that each source and the gross income from No Yes. Fill in the details. | ncome is taxable. Example come; interest; dividends; you received together, list | s of other income are alimon money collected from lawsu it only once under Debtor 1. | its; roy | alties; and gambling and lot | |
| | ~ | | Debtor 1 | | | Debtor 2 | |
| | | | Sources of income Describe below. | Gross income from each source (before deductions and exclusions) | | Sources of income Describe below. | Gross income from each source (before deductions and exclusions) |
| | | rom January 1 of current year until ne date you filed for bankruptcy: | | \$0.00 | - | | |
| | | or last calendar year: lanuary 1 to December 31, 2017) YYYY | Est Food Stamps | \$4,140.00 | - - - | | |
| | | or the calendar year before that: lanuary 1 to December 31, 2016) YYYY | Est Food Stamps | \$4,140.00 | - | | |
| | | | | | _ | | |

Case 18-12860 Doc 1 Filed 05/01/18 Entered 05/01/18 19:10:36 Desc Main Document Page 44 of 74

Banks Debtor 1 Sherral Case number (if known) Last Name List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Amount you still owe Was this payment Dates of payment Total amount paid for Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Number Street Credit card Loan repayment Citv Suppliers or State 7in Code vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Suppliers or Zip Code vendors Other

Case 18-12860 Doc 1 Filed 05/01/18 Entered 05/01/18 19:10:36 Desc Main Document Page 45 of 74

| or 1 | Sherral | | A | Ban | | Case number | (if known) |
|------------------|--|---------------------------------------|---|--|---|---|--|
| | First Name | | Middle Name | Last | Name | | |
| nsi orp ge | ders include your rela | atives; any ou are an a busines | y general partners; officer, director, poss you operate as | relatives of any gerson in control, of | eneral partners; part or owner of 20% or | nerships of which y more of their voting | who was an insider? ou are a general partner; g securities; and any managing domestic support obligations, |
| <u>~</u> | No Vas Listalla sussa | | to state or | | | | |
| | Yes. List all payme | ents to an | insider. | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment |
| | Insider's Name | | | | | | |
| | Number Street | | | | | | |
| | City Sta | ate | Zip Code | | | | |
| | Insider's Name | | · | | | | |
| | Number Street | | | | | | |
| | | | | | | | |
| | City Sta | ate | Zip Code | | | | |
| insi | der? ude payments on del No Yes. List all payme | bts guarai | nteed or cosigned | by an insider. | Total amount paid | Amount you still owe | n account of a debt that benefited an Reason for this payment Include creditor's name |
| | Insider's Name | | | | | | |
| | Number Street | | | | | | |
| | City Sta | ata | | | | | |
| | Oity Oit | ate | Zip Code | | | | |
| | Insider's Name | ate | Zip Code | | | | |
| | | ate | Zip Code | | | | |
| - | Insider's Name Number Street | ate | Zip Code | | | | |

Case 18-12860 Doc 1 Filed 05/01/18 Entered 05/01/18 19:10:36 Desc Main Document Page 46 of 74

Debtor 1 Sherral Banks Case number (if known) Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No Yes. Fill in the details. Nature of the case Status of the case Court or agency Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Case title Pending Court Name On appeal Case number NumberStreet Concluded Citv State Zip Code Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Describe the property Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied. Describe the property Date Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code

Property was attached, seized, or levied.

Case 18-12860 Doc 1 Filed 05/01/18 Entered 05/01/18 19:10:36 Desc Main Document Page 47 of 74

| Debt | tor 1 | Sherral First Name | A Middle Name | Banks Last Name | Case number (if known) | | |
|------|-------|--|-------------------|---------------------------|--------------------------------|--------------------------------|--------------------|
| 11. | | thin 90 days before you filed fo counts or refuse to make a pay | | | pank or financial institution, | set off any amour | its from your |
| | Ш | Yes. Fill in the details. | | Describe the action th | e creditor took | Date action was taken | Amount |
| | | Creditor's Name | | | | | |
| | | Number Street | | Last 4 digits of account | number: XXXX- | | |
| | | City State | Zip Code | | | | |
| 12. | | hin 1 year before you filed for loointed receiver, a custodian, o | | y of your property in the | possession of an assignee fo | r the benefit of c | reditors, a court- |
| | | No Yes | | | | | |
| Part | 5: | List Certain Gifts and Con | tributions | | | | |
| 13. | Wi | • | h gift. | | otal value of more than \$600 | | Value |
| | | Gifts with a total value of mo per person | re than \$600 | Describe the gifts | | Dates you gave the gifts | Value |
| | | Williams, Jonathan Person to Whom You Gave the | Gift | Cash | | 2/1/2018 | \$1500.00 |
| | | Number Street Chicago Heights Illinois City State Person's relationship to you | 60411 Zip Code | | | | |
| | | Person to Whom You Gave the | Gift | | | | |
| | | Number Street | | | | | |
| | | City State Person's relationship to you | Zip Code | | | | |

Case 18-12860 Doc 1 Filed 05/01/18 Entered 05/01/18 19:10:36 Desc Main Document Page 48 of 74

| | 1 Sherral | Α | Banks | Case number (if known) | | |
|----------|---|--|--|-----------------------------|--------------------------------|------|
| | First Name | Middle Name | Last Name | · | | |
| | | | | | | |
| l. Wi | ithin 2 years before you file | d for bankruptcy, dic | I you give any gifts or contributions v | ith a total value of more t | han \$600 to any charity? | |
| | No | | | | | |
| ✓ | | | | | | |
| | Yes. Fill in the details for | each gift or contribut | ion. | | | |
| | Gifts or contributions to | charities | Describe what you contributed | Date | vou Value | |
| | that total more than \$60 | | Joseph Jones | | ributed | |
| | 1014 | | | | | |
| | | | | | | |
| | Charity's Name | | _ | | | |
| | | | | | | |
| | | | | | | |
| | Number Street | | _ | | | |
| | Number Street | | | | | |
| | Cit. Otata | 7:- O | _ | | | |
| | City State | Zip Code | | | | |
| | | | | | | |
| rt 6: | List Certain Losses | | | | | |
| <u>~</u> | mbling? No Yes. Fill in the details. Describe the property yo | u lost and | Describe any insurance covera | ne for the loss Date | of your Value of prop | ertv |
| | how the loss occurred | u iost anu | Include the amount that insurance pending insurance claims on line: A/B: Property. | has paid. List loss | lost | ысту |
| | | | 1 | | | |
| | | | | | | |
| _ | List Certain Payments | · · · · · · | | | | |
| | 1 No | | | | | |
| V | 1 | | | | | |
| | Yes. Fill in the details. | | | | | |
| | 1 | | Description and value of any protransferred | or tra | payment Amount of payment made | |
| | Yes. Fill in the details. | | transferred | or tra | ansfer payment made | |
| | Yes. Fill in the details. Semrad Law Firm | | | or tra | ansfer payment made | |
| | Yes. Fill in the details. Semrad Law Firm Person Who Was Paid | | transferred | or tra | ansfer payment made | |
| | Yes. Fill in the details. Semrad Law Firm | ue | transferred | or tra | ansfer payment made | |
| | Yes. Fill in the details. Semrad Law Firm Person Who Was Paid | ue | transferred | or tra | ansfer payment made | |
| | Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 1444 N. Farnsworth Avenu Number Street | ue | transferred | or tra | ansfer payment made | |
| | Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 1444 N. Farnsworth Avenu | | transferred | or tra | ansfer payment made | |
| | Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 1444 N. Farnsworth Avenu Number Street | ue 60505 | transferred | or tra | ansfer payment made | |
| | Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 1444 N. Farnsworth Avenu Number Street Suite 300 | | transferred | or tra | ansfer payment made | |
| | Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 1444 N. Farnsworth Avenu Number Street Suite 300 Aurora Illinois | 60505 | transferred | or tra | ansfer payment made | |
| | Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 1444 N. Farnsworth Avenu Number Street Suite 300 Aurora Illinois | 60505 | transferred | or tra | ansfer payment made | |
| | Semrad Law Firm Person Who Was Paid 1444 N. Farnsworth Avenu Number Street Suite 300 Aurora Illinois City State Email or website address | 60505 Zip Code | transferred | or tra | ansfer payment made | |
| | Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 1444 N. Farnsworth Avenu Number Street Suite 300 Aurora Illinois City State | 60505 Zip Code | transferred | or tra | ansfer payment made | |
| | Semrad Law Firm Person Who Was Paid 1444 N. Farnsworth Avenu Number Street Suite 300 Aurora Illinois City State Email or website address | 60505 Zip Code | transferred | or tra | ansfer payment made | |
| | Semrad Law Firm Person Who Was Paid 1444 N. Farnsworth Avenu Number Street Suite 300 Aurora Illinois City State Email or website address Person Who Made the Pay | 60505 Zip Code | transferred | or tra | ansfer payment made | |
| | Semrad Law Firm Person Who Was Paid 1444 N. Farnsworth Avenu Number Street Suite 300 Aurora Illinois City State Email or website address | 60505 Zip Code | transferred | or tra | ansfer payment made | |
| | Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 1444 N. Farnsworth Avenu Number Street Suite 300 Aurora Illinois City State Email or website address Person Who Made the Pay | 60505 Zip Code | transferred | or tra | ansfer payment made | |
| | Semrad Law Firm Person Who Was Paid 1444 N. Farnsworth Avenu Number Street Suite 300 Aurora Illinois City State Email or website address Person Who Made the Pay | 60505 Zip Code | transferred | or tra | ansfer payment made | |
| | Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 1444 N. Farnsworth Avenu Number Street Suite 300 Aurora Illinois City State Email or website address Person Who Made the Pay | 60505 Zip Code | transferred | or tra | ansfer payment made | |
| | Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 1444 N. Farnsworth Avenu Number Street Suite 300 Aurora Illinois City State Email or website address Person Who Made the Pay | 60505 Zip Code | transferred | or tra | ansfer payment made | |
| | Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 1444 N. Farnsworth Avent Number Street Suite 300 Aurora Illinois City State Email or website address Person Who Made the Pay Person Who Was Paid Number Street | 60505 Zip Code ment, if Not You | transferred | or tra | ansfer payment made | |
| | Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 1444 N. Farnsworth Avenu Number Street Suite 300 Aurora Illinois City State Email or website address Person Who Made the Pay | 60505 Zip Code | transferred | or tra | ansfer payment made | |
| | Semrad Law Firm Person Who Was Paid 1444 N. Farnsworth Avenu Number Street Suite 300 Aurora Illinois City State Email or website address Person Who Made the Pay Person Who Was Paid Number Street | 60505 Zip Code ment, if Not You | transferred | or tra | ansfer payment made | |
| | Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 1444 N. Farnsworth Avent Number Street Suite 300 Aurora Illinois City State Email or website address Person Who Made the Pay Person Who Was Paid Number Street | 60505 Zip Code ment, if Not You | transferred | or tra | ansfer payment made | |
| | Semrad Law Firm Person Who Was Paid 1444 N. Farnsworth Avenu Number Street Suite 300 Aurora Illinois City State Email or website address Person Who Made the Pay Person Who Was Paid Number Street | 60505 Zip Code ment, if Not You Zip Code | transferred | or tra | ansfer payment made | |

Case 18-12860 Doc 1 Filed 05/01/18 Entered 05/01/18 19:10:36 Desc Main Document Page 49 of 74

| Debtor | r 1 Sherral A | | Banks | Case numb | er (if known) | |
|----------|---|---------------|---|-------------------|---|----------------------------------|
| | First Name Midd | e Name | Last Name | _ | - | |
| h | Vithin 1 year before you filed for bank lelp you deal with your creditors or to bo not include any payment or transfer th | make paym | ents to your creditors? | ır behalf pay o | r transfer any property to a | nyone who promised to |
| [| No Strictly and the | | | | | |
| L | Yes. Fill in the details. | | | | | |
| | | | Description and value of an transferred | y property | Date payment or transfer was made | Amount of payment |
| | Person Who Was Paid | | | | | |
| | Number Street | | | | | |
| | City State Zi | p Code | | | | |
| Ir | he ordinary course of your business of notude both outright transfers and transfer nd transfers that you have already listed of the course of | ers made as s | ecurity (such as the granting of a | security interest | or mortgage on your property | y). Do not include gifts |
| L | Yes. Fill in the details. | | | | | |
| | | | Description and value of pro transferred | pay | scribe any property or rments received or debts pa exchange | Date aid transfer was made |
| | Person Who Received Transfer | | | | | |
| | Number Street | | | | | |
| | City State Zi Person's relationship to you | p Code | | | | |
| | Person Who Received Transfer | | | | | |
| | Number Street | | | | | |
| | City State Zi Person's relationship to you | p Code | | | | |
| b | Vithin 10 years before you filed for bar leneficiary? These are often called asset-protection de | | I you transfer any property to a | self-settled tru | ust or similar device of whic | ch you are a |
| <u> </u> | ✓ No | , | | | | |
| L | Yes. Fill in the details. | | Description and value of the | ne property tra | nsferred | Date transfer was |
| | | | | | | made |
| | Name of trust | | | | | |

Case 18-12860 Doc 1 Filed 05/01/18 Entered 05/01/18 19:10:36 Desc Main Document Page 50 of 74

Banks Debtor 1 Sherral Case number (if known) First Name List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account Type of account or Date Last balance number instrument account was before closed, sold, closing or moved, or transfer transferred Chase Bank Checking XXXX-2/1/2018 \$ 0.00 Person Who Was Paid Savings P.O. Box 659732 Number Street Money market Brokerage San Antonio 78265 Other Zip Code City State Chase Bank XXXX-Checking 2/1/2018 \$ 0.00 Person Who Was Paid P.O. Box 659732 Savings Number Street Money market Brokerage San Antonio Texas 78265 Other City State Zip Code 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? No Name of Financial Institution Name Yes Number Street Number Street City State Zip Code State Zip Code 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Do you still Who else had access to it? Describe the contents have it? No Name of Storage Facility Name Yes Number Street Number Street Citv State 7in Code City State Zip Code

Case 18-12860 Doc 1 Filed 05/01/18 Entered 05/01/18 19:10:36 Desc Main Document Page 51 of 74

Banks Debtor 1 Sherral Case number (if known) Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. **✓** No Yes. Fill in the details. Where is the property? Describe the contents Value Owner's Name **NumberStreet** Number Street City State Zip Code State Zip Code **Give Details About Environmental Information** For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Governmental unit Date of Environmental law, if you know it notice Name of site Governmental unit Number Street **NumberStreet** City State Zip Code Zip Code State 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street **NumberStreet**

City

State

Zip Code

State

Zip Code

City

Case 18-12860 Doc 1 Filed 05/01/18 Entered 05/01/18 19:10:36 Desc Main Document Page 52 of 74

| Deb | tor 1 | Sherral | | A | Banks | Case | number (if | known) | | |
|------|----------|-----------------------------|-----------------|---------------------|--|----------------------|-------------|-----------------|------------------|----------------|
| | | First Name | · | Middle Name | Last Name | | | | | |
| 26. | Hav | e you been a party | y in any judici | al or administra | ative proceeding unde | r any environment | al law? In | clude settlemer | nts and orde | rs. |
| | ✓ | No Yes. Fill in the det | raile | | | | | | | |
| | Ч | 100.1 11 10 000 | ano. | | Court or agency | | Nature o | of the case | | Status of the |
| | | Case title | | | | | | | | case |
| | | | | | Court Name | | | | | Pending |
| | | Case number | | i | NumberStreet | | | | | On appeal |
| | | | | ā | City State | Zip Code | | | | Concluded |
| Part | 11: | Give Details Ab | oout Your B | usiness or Co | nnections to Any Bu | usiness | | | | |
| 27. | Wit | nin 4 years before | you filed for l | oankruptcy, did | you own a business or | r have any of the fo | ollowing c | onnections to a | ny business? | , |
| | | | | | de, profession, or othe | = | I-time or p | art-time | | |
| | | A member of A partner in a | | ility company (L | LC) or limited liability p | artnership (LLP) | | | | |
| | | | - | naging executiv | e of a corporation | | | | | |
| | | An owner of a | at least 5% of | the voting or e | quity securities of a cor | rporation | | | | |
| | ✓ | No. None of the a | | | | hugingg | | | | |
| | Ш | res. Check all the | ат арріу ароу | e and illi in the c | details below for each Describe the nat | cure of the busines | s | Employer Ider | ntification nu | ımber Do not |
| | | | | | | | | include Socia | I Security nu | imber or ITIN. |
| | | Business Name | | | _ | | | EIN: | | |
| | | Number Street | | | Name of account | tant or bookkeepe | r | Dates busines | ss existed | |
| | | City | State | Zip Code | _ | | | From | To | |
| | | | | | | | | | | |
| | | | | | Describe the nat | ure of the busines | s | Employer Ider | ntification nu | ımber Do not |
| | | | | | | | | include Socia | l Security nu | imber or ITIN. |
| | | Business Name | | | _ | | | EIN: | | |
| | | Number Street | | | — Name of account | tant or bookkeepe | <u> </u> | Dates busines | ss existed | |
| | | City | State | Zip Code | | tant of bookkeepe | • | From | То | |
| | | | | | | | | | | |
| | | | | | December the most | ure of the busines | | Employer Ider | - ! : : : | b Dt |
| | | | | | Describe the nat | ure of the business | S | include Socia | | |
| | | Business Name | | | _ | | | EIN: | | |
| | | Number Street | | | - L | | | Dates busines | ss existed | |
| | | City | State | Zip Code | Name of account | tant or bookkeepe | r | From | То | |
| | | | | | | | | | <u> </u> | |
| | | | | | | | | | | |

Case 18-12860 Doc 1 Filed 05/01/18 Entered 05/01/18 19:10:36 Desc Main Document Page 53 of 74

| Debto | or 1 Sherral | Α | Banks | Case number (if known) |
|--------|--|-------------------------|--------------------------------|--|
| | First Name | Middle Name | Last Name | |
| | Within 2 years before you filed creditors, or other parties. No Yes. Fill in the details belo | | ou give a financial statemen | nt to anyone about your business? Include all financial institutions, |
| | | | Date issued | |
| | | | | |
| | Name | | MM/DD/YYYY | |
| | Number Street | | _ | |
| | | | | |
| | City State | Zip Code | _ | |
| Part 1 | 12: Sign Below | | | |
| tru | ue and correct. I understand bankruptcy case can result ii | that making a false sta | tement, concealing propert | nts, and I declare under penalty of perjury that the answers are ty, or obtaining money or property by fraud in connection with 90 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
| | /s/ Sherral E | | | × |
| | Signature of De | ebtor 1 | | Signature of Debtor 2 |
| | Date 5/1/201 | 8 | | Date |
| | No Yes | | | uals Filing for Bankruptcy (Official Form 107)? |
| | d you pay or agree to pay sor | neone who is not an at | torney to neip you iiil out ba | ankruptcy ionno: |
| | No Yes. Name of person | | | Attach the Bankruptcy Petition Preparer's Notice, |

Case 18-12860 Doc 1 Filed 05/01/18 Entered 05/01/18 19:10:36 Desc Main Document Page 54 of 74

B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT

| | | Northern Distric | et of illinois | | | | | |
|-----|--|---------------------------------|--------------------------------------|-------------------------------|--|--|--|--|
| re_ | Sherral A Banks | | Case No. | | | | | |
| | Debtor | | Q1 . | (If known) | | | | |
| | | | Chapter | Chapter 13 | | | | |
| | DISCLOSURE OF | COMPENSATIO | N OF ATTORNEY F | OR DEBTOR | | | | |
| 1. | Pursuant to 11 U.S.C. § 329(a) and F compensation paid to me within one rendered or to be rendered on behalf | year before the filing of the p | petition in bankruptcy, or agreed to | o be paid to me, for services | | | | |
| | For legal services, I have agreed to ac | ccept | | \$4,000.00 | | | | |
| | Prior to the filing of this statement I h | nave received | | \$350.00 | | | | |
| | Balance Due | | | \$3,650.00 | | | | |
| 2. | The source of the compensation paid | to me was: | | | | | | |
| | ✓ Debtor | Other (specify) | | | | | | |
| 3. | The source of the compensation paid | I to me is: | | | | | | |
| | ✓ Debtor | Other (specify) | | | | | | |
| 4. | I have not agreed to share the abmembers and associates of my la | | n with any other person unless the | ey are | | | | |
| | I have agreed to share the above-disclosed compensation with a other person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached. | | | | | | | |
| 5. | i. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; | | | | | | | |
| | b. Preparation and filing of any p | petition, schedules, statemen | nts of affairs and plan which may b | oe required; | | | | |
| | c. Representation of the debtor | at the meeting of creditors ar | nd confirmation hearing, and any a | adjourned hearings thereof; | | | | |
| | d. Representation of the debtor | in adversary proceedings and | d other contested bankruptcy mat | ters; | | | | |
| 6. | By agreement with the debtor(s), the | above-disclosed fee does no | t include the following services: | | | | | |
| | | | | | | | | |
| | | CERTIFICA | ATION | | | | | |
| | certify that the foregoing is a complet or(s) in this bankruptcy proceedings. | e statement of any agreemen | it or arrangement for payment to n | ne for representation of the | | | | |
| | 5/1/2018 | | /s/ James Nowak | | | | | |
| | Date | | Signature of Attorney | | | | | |
| | | | Semrad Law Firm | | | | | |
| | | | Name of law firm | | | | | |

THE SEMRAD LAW FIRM

Attorneys & Counselors at Law 20 S. Clark, 28th Floor Chicago, IL 60603 (312) 913-0625

Re: Agreement Regarding Priority Treatment of The Semrad Law Firm LLC's Fees and Expenses

Dear Client,

Thank you for choosing The Semrad Law Firm LLC (the Firm) to represent you in connection with your Chapter 13 bankruptcy case. In addition to the terms contained in the Court Approved Retention Agreement (CARA) it is our policy to confirm in writing how and when the Firm's fees and expenses will be paid. If there are any terms contained in this document that are in conflict with CARA, those terms are void.

Aside from any initial retainer that you pay the Firm, you will be required to pay the Firm's fees and expenses through the Chapter 13 plan after it is approved by the Bankruptcy Court. Each month, you will pay the Trustee the amount stated in your Chapter 13 plan. The Trustee will then disburse that money out according to the provisions of your plan to the Firm and other creditors.

The model Chapter 13 plan gives fourth priority to attorneys' fees, after the Trustee's fees, current mortgage payments, and payments to secured creditors listed in Sections 3.1, 3.2, or 3.3 of the model plan(for example, payments due to lenders on a loan to purchase a car, furniture, appliance or other item of personal property). The Firm intends to alter this priority scheme by modifying the model Chapter 13 plan to provide for payment of the Firm's attorney's fees and costs before any payments are made to your other creditors. That means that the money you send to the Trustee each month will first be paid to the Firm and not to pay the claims of your other creditors until the Firm's fees and expenses are paid in full. Such claims of other creditors include your car note, other financed personal property, parking tickets, taxes, and any claims of other creditors that may be included in your plan.

Aside from the Firm's commitment to perform any and all work reasonably necessary to represent you in this bankruptcy case without requiring you to pay a substantial amount of the fees and expenses up front, there is no benefit to you from this priority treatment of the Firm's fees and expenses. Furthermore, this arrangement presents certain risks. In the event that your case is dismissed before completion of the plan or if you decide to convert your case to a case under Chapter 7, it is likely that the Firm's attorneys' fees will have been paid while little of your other debts are paid.

In addition, there is the possibility that a creditor or the Trustee may object to the Firm being paid under this altered priority arrangement. In the event of such an objection, the Firm may lower that amount that the Firm will receive each month and increase the monthly payment to such creditor in order to resolve the objection. However, creditors may seek to recover

Case 18-12860 Doc 1 Filed 05/01/18 Entered 05/01/18 19:10:36 Desc Main Document Page 56 of 74

THE SEMRAD LAW FIRM

Attorneys & Counselors at Law 20 S. Clark, 28th Floor Chicago, IL 60603 (312) 913-0625

additional attorneys' fees as a result of any such objection and you may be required to pay the creditors' additional attorneys' fees over time through the Chapter 13 Plan.

If you do not wish to pay the Firm's attorneys' fees and expenses ahead of your creditors as set forth above, you have the following options:

- a. You can elect to pay the Firm an upfront retainer of \$1,500 prior to filing your case and elect for the plan to pay your car note (and/or other claims secured by personal property) and mortgage arrears in equal set monthly payments along with the Firm's fees and expenses; or
- b. You can seek representation by another firm under a different payment arrangement.

Please carefully review this letter. If the terms are not consistent with your understanding of our engagement in any respect or if you have any questions concerning the same, please notify us promptly. You can also seek advice from other counsel regarding your rights under this arrangement. Firm policy and a prior court order require that we receive confirmation of your acceptance of these terms in the form of your signature at the bottom of this letter. Please return the signed copy to the Firm as soon as possible.

Very Truly Yours,

THE SEMRAD LAW FIRM LLC

Accepted:

Attorneys & Counselors at Law 20 S. Clark, 28th Floor Chicago, IL 60603 (312) 913-0625

RE: Addendum to the Agreement Regarding Priority Treatment of The Semrad Law Firm LLC's Fees and Expenses

Client name

A Chapter 13 plan will be filed on your behalf to repay your creditors. Your Chapter 13 plan payment will be \$300.00 at the time of filing. This monthly Chapter 13 plan payment can be subject to change during your case. Included within this monthly plan payment is the Firm's compensation for representing you during the Chapter 13. You will be paying the Firm an attorney fee of \$4000.00 with an initial down payment of \$350.00.

Within the Chapter 13 plan payment, you will be paying back your creditors and the Firm's attorney fees.

- 2013 Nissan Altima The plan will pay The Car Loan Store \$50.00 as adequate protection until April of 2020. Adequate protection allows for the creditor to receive funds that protects the creditor from losing value in the car that is secured to the loan. As of filing, the balance on the debt is \$5,000.00.
- General Unsecured Creditors Your remaining creditors are paid after your car loan and attorney's fees are paid. These creditors will receive funds in a proportionate amount based on the percentage of your total remaining debt. These creditors will be paid 10% of their total claim in the bankruptcy. Any remaining amount left will be discharged as part of your bankruptcy case.

THE SEMRAD LAW FIRM LLC

One of its Attorneys

Accepted:

Date: May 1,2018

Case 18-12860 Doc 1 Filed 05/01/18 Entered 05/01/18 19:10:36 Desc Main Document Page 58 of 74

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.

Case 18-12860 Doc 1 Filed 05/01/18 Entered 05/01/18 19:10:36 Desc Main Document Page 59 of 74

6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.



Case 18-12860 Doc 1 Filed 05/01/18 Entered 05/01/18 19:10:36 Desc Main Document Page 60 of 74

- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to \$ 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3.If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.



D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
- The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:

 Client understands that any funds that client is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services. However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate tasks and functions for the attorney and support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

E. CONDUCT AND DISCHARGE

- 1. Improper conduct by the attorney. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. Improper conduct by the debtor. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.



F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00
- 2. In addition, the debtor will pay the filing fee in the case and other expenses of \$371.76
- 3. Before signing this agreement, the attorney has received, \$350.00 toward the flat fee, leaving a balance due of \$3,650.00; and \$61.76 for expenses, leaving a balance due of \$4,021.76
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

| Date: 5/1/2018 | |
|--|------------------------|
| Signed: | |
| /s/ Sherral Banks Sherral B | 'h |
| | /s/ James Nowak |
| Debtor(s) | Attorney for Debtor(s) |
| Do not sign if the fee amounts at top of | this page are blank. |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

| | \$245 | filing fee |
|---|-------|--------------------|
| | \$75 | administrative fee |
| + | \$15 | trustee surcharge |
| | \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

| | \$1,167 | filing fee |
|---|---------|--------------------|
| + | \$550 | administrative fee |
| | \$1.717 | total fee |

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$275 | total fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$200 | filing fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans.
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.justice.gov/ust/eo/hapcpa/ccde/cc approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Case 18-12860 Doc 1 Filed 05/01/18 Entered 05/01/18 19:10:36 Desc Main Document Page 67 of 74

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| In re: | Banks, Sherral A | Case No | |
|-----------------|------------------|---|-------------------------------------|
| | Debtor(s) | | |
| | | Chapter. | Chapter13 |
| | VERIF | ICATION OF CREDITOR MAT | RIX |
| Th knowledge | | rify that the attached list of creditors is tru | ue and correct to the best of their |
| Date: | 5/1/2018 | /s/ Banks, Sherra | I A |
| | | Banks, Sherral A Signature of Deba | tor |

DEPT OF EDUCATION/NELN 121 S 13TH ST LINCOLN, NE, 68508

ENHANCED RECOVERY CO L 8014 BAYBERRY RD JACKSONVILLE, FL, 32256

CONVERGENT OUTSOURCING 10750 HAMMERLY BLVD #200 Houston, TX, 77043

CHASE CARD BANK ONE CARD SERV 2500 WESTFIELD DRI ELGIN, IL, 60124

CAPITALONE c/o Pollack & Rosen, P.C 1825 Barrett Lakes Blvd Suite 510 Kennesaw, GA, 30144

ATG CREDIT 1700 W CORTLAND ST STE 2 CHICAGO, IL, 60622

CREDMGMTCNTL P.O. BOX 1654 GREEN BAY, WI, 54301

ComEd 1919 Swift Drive Oak Brook, IL, 60523

Nicor - PO Box 5407 PO Box 549 Aurora, IL, 60507

The Car Store Auto Corp 207 S Lake St Aurora, IL, 60506

Chase PO Box 15821 Cardmember services Wilmington, DE, 19850 City of Chicago - Dep't of Revenue PO Box 88292 Chicago, IL, 60608

Arnold Scott Harris 111 W. Jackson # 600 Chicago, IL, 60604

City of Aurora Po Box 457 Wheeling, IL, 60090

Credit Collection Services 725 Canton St Norwood, MA, 02062

Geico Casualty Company One Geico Center Macon, GA, 31296

ADT 1 Town Center Rd. Boca Raton, FL, 33486

Municipal Collections of America 3348 Ridge Rd. Lansing, IL, 60438

Village of South Chicago Heights 3317 Chicago Road Chicago Heights, IL, 60411

Rasmussen College 2363 Sequoia Dr. Aurora, IL, 60506

Waubonsee Community College Route 47 Waubonsee Drive Sugar Grove, IL, 60554

Case 18-12860 Doc 1 Filed 05/01/18 Entered 05/01/18 19:10:36 Desc Main Document Page 70 of 74

| Debtor 1 Sherral | A Middle Name | Banks Last Name | Case number (if known) | |
|--|---|--|--|--|
| First Name Answer These Que | Middle Name estions for Reporting Pu | - Control of the Cont | | |
| eart 6: Answer These Que 6. What kind of debts do you have? | 16a. Are your debts pri "incurred by an ind No. Go to line ✓ Yes. Go to line 16b. Are your debts pri money for a busine No. Go to line ✓ Yes. Go to line | marily consumer deb lividual primarily for a p 16b. 17. imarily business debts ess or investment or th 16c. | ersonal, family, or househ | s that you incurred to obtain business or investment. |
| 7. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | Yes. I am filing under expenses are pa | der Chapter 7. Go to line Chapter 7. Do you estima aid that funds will be avail | | |
| 8. How many creditors do you estimate that you owe? | ✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999 | 5,00 | 0-5,000 1-10,000 01-25,000 | 25,001-50,000 50,001-100,000 More than 100,000 |
| 9. How much do you estimate your assets to be worth? | \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | \$10, | 00,001-\$10 million 000,001-\$50 million 000,001-\$100 million 0,000,001-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion |
| estimate your liabilities to be? | \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 millio | \$10, | 00,001-\$10 million 000,001-\$50 million 000,001-\$100 million 0,000,001-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion |
| Part 7: Sign Below | | | | |
| For you | correct. If I have chosen to file to of title 11, United State under Chapter 7. If no attorney represent out this document, I had I request relief in accord understand making a fixonnection with a bank both. 18 U.S.C. §§ 152 /s/ Sherral Banks Signature of Debtor | s me and I did not pay ve obtained and read to dance with the chapter false statement, concearuptcy case can result 1, 1341, 1519, and 357 | ware that I may proceed, if the relief available under each or agree to pay someone when the notice required by 11 U. of title 11, United States Caling property, or obtaining in fines up to \$250,000, or 1. | Dode, specified in this petition. If money or property by fraud in rimprisonment for up to 20 years, or Debtor 2 |
| | Executed on5/ | /1/2018 MM / DD / YYYY | Executed of | MM / DD / YYYY |

Case 18-12860 Doc 1 Filed 05/01/18 Entered 05/01/18 19:10:36 Desc Main Document Page 71 of 74

| Debtor 1 | Sherral | Α | Banks |
|---------------------|--------------------------|---------------|----------------------|
| | First Name | Middle Name | Last Name |
| Debtor 2 | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name |
| United States B | ankruptcy Court for the: | Northern | District of Illinois |
| | | V | (State) |

Official Form 106Dec

Check if this is an amended filling

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Part 1: Sign Below | | |
|---|---|-----|
| Did you pay or agree to pay someone who is NOT ar | attorney to help you fill out bankruptcy forms? | |
| ✓ No | | 419 |
| Yes. Name of person | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). | |
| | | |
| | | |
| | the summary and schedules filed with this declaration and | |
| that they are true and correct. * /s/ Sherral Banks Sherral Bh | | |
| Signature of Debter 1 | Signature of Debtor 2 | |
| | Date | |
| Date 5/1/2018 MM/DD/YYYY | MM/DD/YYYY | |

Case 18-12860 Doc 1 Filed 05/01/18 Entered 05/01/18 19:10:36 Desc Main Document Page 72 of 74

| Debtor 1 | Sherral | Α | Banks | Case number (if known) | | | | |
|-------------------------------|---|--------------------------------|-----------------------------|---|--|--|--|--|
| | First Name | Middle Name | Last Name | | | | | |
| | thin 2 years before yo editors, or other parti No Yes, Fill in the detai | ies. | you give a financial stater | nent to anyone about your business? Include all financial institutions, | | | | |
| | | | Date issued | | | | | |
| | Name | | MM/DD/YYYY | | | | | |
| | Number Street | | - | | | | | |
| | City | State Zip Code | - | | | | | |
| | | | | | | | | |
| Part 12: | Sign Below | | | | | | | |
| | nkruptcy case can re | esult in fines up to \$250,000 | , or imprisonment for up t | perty, or obtaining money or property by fraud in connection with to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. | | | | |
| | Signature | e of Debtor | | Signature of Debtor 2 | | | | |
| | Date 5/ | /1/2018 | | Date | | | | |
| Did y | Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? | | | | | | | |
| $\mathbf{\underline{\nabla}}$ | No Yes | | | | | | | |
| Did y | you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? | | | | | | | |
| | No | | | | | | | |
| | Yes. Name of person | | | Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). | | | | |

Case 18-12860 Doc 1 Filed 05/01/18 Entered 05/01/18 19:10:36 Desc Main Document Page 73 of 74

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| In re: | Banks, Sherral A | Case No | |
|-----------------|---|---|--------------------------------------|
| | Debtor(s) | | |
| | | Chapter. | Chapter13 |
| | VERIFICAT | TION OF CREDITOR MAT | TRIX |
| Th knowledge | ne above named Debtors hereby verify thate. | t the attached list of creditors is to | rue and correct to the best of their |
| | | | |
| Date: | 5/1/2018 | /s/ Banks, Sherral A Banks, Sherral A Signature of De | |

Case 18-12860 Doc 1 Filed 05/01/18 Entered 05/01/18 19:10:36 Desc Main Document Page 74 of 74

| Debto | r 1 Sherral First Name | A Middle Name | Banks Last Name | Case number (if known) | | | |
|--------|--|--|----------------------------------|--|-------------|--|--|
| 16. | Calculate the median family income that applies to you. Follow these steps: | | | | | | |
| | 16a. Fill in the sta | te in which you live. | Illinois | | | | |
| | 16b. Fill in the nu | mber of people in your household. | 4 | | \$96,485.00 | | |
| | 16c. Fill in the median family income for your state and size of household To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. | | | | | | |
| 17. | How do the lines compare? | | | | | | |
| | 17a. Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, Disposable income is not determined under 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NOT fill out Calculation of Disposable Income (Official Form 122C-2). | | | | | | |
| | 17b. Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, Disposable income is determined under 11 U.S.C. § 1325(b)(3). Go to Part 3 and fill out Calculation of Disposable Income (Official Form 122C-2). On line 39 of that form, copy your current monthly income from line 14 above. | | | | | | |
| Part : | Calculate Y | our Commitment Period Under | 11 U.S.C. §1325(I | b)(4) | | | |
| 18. | Copy your total | average monthly income from line 1 | 1. | | \$2,582.67 | | |
| 19. | the state of the s | | | | | | |
| | | adjustment does not apply, fill in 0 on | | | -\$0.00 | | |
| | | ne 19a from line 18. | | | \$2,582.67 | | |
| 20. | Calculate your current monthly income for the year. Follow these steps: | | | | | | |
| | 20a. Copy line 19 | | | | \$2,582.67 | | |
| | Multiply by 12 (the number of months in a year). | | | | | | |
| | 20b. The result is your current monthly income for the year for this part of the form. | | | | | | |
| | 20c. Copy the median family income for your state and size of household from line 16c. | | | | | | |
| | How do the line | s compare? | | | | | |
| | Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, The commitment period is 3 years. Go to Part 4. | | | | | | |
| | Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, The commitment period is 5 years. Go to Part 4. | | | | | | |
| Part | 4: Sign Below | | | | | | |
| | By signing h | ere, I declare under penalty of perjury th | nat the information on | this statement and in any attachments is true and correct. | | | |
| | メ /s/ Sh | erral Banks Herril | But : | × | | | |
| | Signatur | e of Debtor 1 | | Signature of Debtor 2 | | | |
| | Date 5/N | (1/2018 IM/DD/YYYY | | Date MM/DD/YYYY | | | |
| | If you check If you check above. | ed 17a, do NOT fill out or file Form 122 ed 17b, fill out Form 122C-2 and file it | 2C-2. with this form, On line | 39 of that form, copy your current monthly income from lin | e 14 | | |